

2

85-45064

## Certificate of Marriage

State of Maryland

LICENSE NO.  
126547Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**I Hereby Certify that on the 25TH day of MAY 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JAMES R. HARRIS Age 31 Birthplace MD.  
(State)

Groom's Residence 4224 LOCH RAVEN BLVD. Marital Status SINGLE

Bride's Name LISA CATHERINE GARDNER Age 28 Birthplace PA.  
(State)

Bride's Residence 1404 WILTWYCK RD. BALTO. CO., MD. Marital Status SINGLE

Relationship to groom if any NONE

REV. VERNON N. DOBSON

Name of Officiating Clergy or Authorized Officer

MINISTER-UNION BAPTIST CHURCH

Title and Religious Denomination or Office

3401 CADARVALE RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45065

## Certificate of Marriage

State of Maryland

LICENSE NO.  
127496

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29TH day of JUNE 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

LEROY W WILLIAMS JR

Age 41Birthplace MD.  
(State)Groom's  
Residence

3 SUGAR PLUM CT BALTO CO MD

Marital Status

**DIVORCED**Bride's  
Name

JUDY C WASHINGTON

Age 27 BirthplaceALA.  
(State)Bride's  
Residence

3 SUGAR PLUM CT BALTO CO MD

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

VERNON N. DOBSON

Name of Officiating Clergy or Authorized Officer

MINISTER

Title and Religious Denomination or Office

3401 CADARVALE RD/

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 0 9 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date JUNE 26 85License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45066

## Certificate of Marriage

State of Maryland

LICENSE NO.  
128130

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27th day of JULY 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name GEORGE JOSEPH BRUGGEMAN, JR. Age 25 Birthplace MD.  
(State)Groom's Residence 868 E. LOMBARD STREET Marital Status SINGLEBride's Name PAMELA ANN MARTINES Age 21 Birthplace VA.  
(State)Bride's Residence 868 W. LOMBARD STREET Marital Status SINGLERelationship to groom if any NONEROBERT A. REED

Name of Officiating Clergy or Authorized Officer

85 PASTOR- ST. PETER APOSTLE CHURCH (CATHOLIC)

Title and Religious Denomination or Office

848 HOLLINS ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT.

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date JULY 22,85License Fee \$ 25

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45067

LICENSE NO.  
128242

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24th day of AUGUST 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PAUL ALLAN BUXENSTEIN**

Age **41** Birthplace **MD.**  
(State)

Groom's Residence **3206 LORENA AVENUE**

Marital Status **DIVORCED**

Bride's Name **FLORENCE ANN LUCKE**

Age **28** Birthplace **MD.**  
(State)

Bride's Residence **3206 LORENA AVENUE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**MICHAEL ROACH**

Name of Officiating Clergy or Authorized Officer

License Date **JULY 26 85**

**PRIEST- ROMAN CATHOLIC**

Title and Religious Denomination or Office

**ST. PETER THE APOSTLE CHURCH**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

85-45068

State of Maryland

LICENSE NO.

128706

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of AUGUST 1985the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ROBERT EDWARD BROWN**Age **18** Birthplace **MD.**  
(State)Groom's  
Residence **309 N. FULTON AVENUE**Marital Status **SINGLE**Bride's  
Name **SHARON DOREEN CUNNINGHAM**Age **19** Birthplace **MD.**  
(State)Bride's  
Residence **309 N. FULTON AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE**ELDER BEN WINDOM

Name of Officiating Clergyman or Authorized Officer

License Date **AUG. 15 85**PROST

Title and Religious Denomination or Office

4208 FLOWERTON RD.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 02 1985**

License Fee

\$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45069

## State of Maryland

 LICENSE NO.  
128371

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**
*I Hereby Certify* that on the 8TH day of AUGUST 19 85

 the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>HORACE DINGLE</b>	Age	<b>62</b>	Birthplace	<b>S. CAROLINA</b> <small>(State)</small>
Groom's Residence	<b>608 KAHN DR. BALTO. CO., MD.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>MARY E. CARTER</b>	Age	<b>55</b>	Birthplace	<b>MARYLAND</b> <small>(State)</small>
Bride's Residence	<b>608 KAHN DR. BALTO. CO., MD.</b>	Marital Status	<b>WIDOW</b>		

 Relationship to groom if any **NONE**
**EMMETT C. BURNS**
Name of Officiating Clergy or Authorized Officer
**RISING SUN FIRST BAPTIST CHURCH**
Title and Religious Denomination or Office
**3600 OAK AV.**
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of the record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

 License Date **AUGUST 5 85**

 License Fee \$ 75.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45070

State of Maryland

LICENSE NO.

129373

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 27th day of SEPTEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JOHN P. DONOHUE Age 64 Birthplace MD.  
(State)

Groom's Residence 912 ST. CHARLES AVE. BALTO.CO., MD. Marital Status WIDOWER

Bride's Name DOROTHY M. LISTER Age 58 Birthplace MD.  
(State)

Bride's Residence 5212 HAZELWOOD AVE. BALTO.CO., MD. Marital Status WIDOW

Relationship to groom if any NONE

MICHAEL ROACH

Name of Officiating Clergyman or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

ST. PETER THE APOSTLR CHURCH

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 20 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee

\$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

15 SEP 85 11:01

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45071

State of Maryland

LICENSE NO.  
129475

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 28th day of SEPTEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MARTIN J. BLAIR

Age 24 Birthplace MD.  
(State)

Groom's

Residence

1728 HARTSDALE ROAD

Marital Status SINGLE

Bride's  
Name

JOYCE L. JANOWIAK

Age 26 Birthplace MD.  
(State)

Bride's

Residence

1807 DAHOUSIE CT. BALTO. CO., MD.

Marital Status SINGLE

Relationship to groom if any NONE

PAUL J. HENRY

Name of Officiating Clergyman or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

BALTIMORE, MARYLAND

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 19 1985

SAUNDRA E. BANKS, CLERK

Signature-Clerk of the Court

License Fee - Resident  
Non-Resident

\$ 25.00  
\$

2

## Certificate of Marriage

85-45072

State of Maryland

LICENSE NO.

129151

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14TH day of SEPTEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name STANLEY L. MOSLEY

Age 28 Birthplace MD.  
(State)

Groom's Residence 5429 JAMESTOWNE COURT

Marital Status SINGLE

Bride's Name CRYSTAL D. WARE

Age 25 Birthplace MD.  
(State)

Bride's Residence 5429 JAMESTOWNE COURT

Marital Status SINGLE

Relationship to groom if any NONE

REV. VERNON N. DOBSON

Name of Officiating Clergyman or Authorized Officer

MINISTER-UNION BAPTIST CHURCH

Title and Religious Denomination or Office

1219 DRUID HILL AV.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45073

LICENSE NO.

129921

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 12TH day of OCTOBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

EDGAR A JONES

Age 38

Birthplace

MD  
(State)

Groom's  
Residence

1516 STONEWOOD RD

Marital Status

SINGLE

Bride's  
Name

KAREN D SMITH

Age 29

Birthplace

WASH DC  
(State)

Bride's  
Residence

1516 STONEWOOD RD

Marital Status

SINGLE

Relationship to groom if any

NONE

REV. VERNON N. DOBSON

Name of Officiating Clergy or Authorized Officer

MINISTER-UNION BAPTIST CHURCH

Title and Religious Denomination or Office

3401 CARDARVALE RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 55.00

DECO 91985  
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45074

LICENSE NO.

129913

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 26th day of OCTOBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL G. MARSHALL**

Age **24** Birthplace **MD.**

(State)

Groom's Residence **7427 CARROLL AVE MONT. CO MD**

Marital Status

**SINGLE**

Bride's Name **SHAWN M. BADOLATO**

Age **23** Birthplace **N CAR**

(State)

Bride's Residence **7427 CARROLL AVE MONT CO MD**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

**REV. GARY POWELL, OF M. CAP**

Name of Officiating Clergy or Authorized Officer

**OFFICIATING PRIEST**

Title and Religious Denomination or Office

**408 NORTH CHARLES ST. 21201**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 13 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **OCT 8 85**

**JW**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45075

## Certificate of Marriage

State of Maryland

LICENSE NO.

130047

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 19 day of Oct. 1985  
Balto. Md.  
 the following persons were by me united in marriage at \_\_\_\_\_  
 (City or Town)  
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CALVIN JULIUS TAYLOR, SR.** Age **31** Birthplace **MD.**  
 (State)  
 Groom's Residence **2210 PINWOOD AVENUE** Marital Status **WIDOWER**  
 Bride's Name **MARITA LOVETTE HEATHERINGTON** Age \_\_\_\_\_ Birthplace **FL.**  
 (State)  
 Bride's Residence **2210 PINWOOD AVENUE** Marital Status **SINGLE**  
 Relationship to groom if any **NONE**

License Date **OCT. 16 85**

TT

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45076

## Certificate of Marriage

State of Maryland

LICENSE NO.

130583

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 22nd day of NOVEMBER 9 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HOWARD F. HOLEHAN, JR**Age **36** Birthplace **MD.**  
(State)Groom's Residence **4119 CHESTERFIELD AV.**Marital Status **SINGLE**Bride's Name **MARJORIE DRU KEENER**Age **30** Birthplace **MD.**  
(State)Bride's Residence **4119 CHESTERFIELD AV.**Marital Status **SINGLE**

Relationship to groom if any

**NONE**REV, WILLIAM G. THOMPSON

Name of Officiating Clergy or Authorized Officer

PASTOR-~~THE~~ AMERICAN LUTHERAN CHURCH

Title and Religious Denomination or Office

403 N. PATTERSON PARK AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 6 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate of Clerk of Court.

2

85-45077

## Certificate of Marriage

State of Maryland

LICENSE NO.

130199

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ANTHONY J ALASHA

Age 25 Birthplace MD.  
(State)Groom's  
Residence

7521 PATAPSCO DR CARROLL CO MD

Marital Status SINGLEBride's  
Name

RENEE M ROTTMAN

Age 25 Birthplace MD.  
(State)Bride's  
Residence

8521 PATAPSCO DR CARROLL CO MD

Marital Status SINGLE

Relationship to groom if any

NONE

REV. JAMES H. DOWDY

Name of Officiating Clergy or Authorized Officer

PASTOR-ST. JEROME CHURCH

Title and Religious Denomination or Office

775 W. HAMBURG ST 21230

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 6 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date NOV. 485License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45078

## Certificate of Marriage

State of Maryland

LICENSE NO.

130152

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JAMES R. RICE

Age 30 Birthplace MD.  
(State)Groom's  
Residence

2547 ROBB STREET

Marital Status SINGLEBride's  
Name

ROCHELLE THROWER

Age 28 Birthplace MD.  
(State)Bride's  
Residence

1813 E. FEDERAL STREET

Marital Status SINGLERelationship to groom if any NONE

DOROTHY MAE JACKSON

Name of Officiating Clergy or Authorized Officer

License Date OCT. 2485 SPRITUAL BAPTIST

Title and Religious Denomination or Office

2707 HUGO AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DECO 6 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45079

State of Maryland

LICENSE NO.  
130822

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ROBERT BRUCE DOWDY**  
Groom's  
Residence **729 W. LEXINGTON ST.**

Age **31** Birthplace **MD.**  
(State)

Marital Status **SINGLE**

Bride's  
Name **KASSI LISA BURTON**  
Bride's  
Residence **815 WOODINGTON RD.**

Age **22** Birthplace **MD.**  
(State)

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JAMES S. WEBB., R.**

Name of Officiating Clergy or Authorized Officer

**PASTOR- UNION MEMORIAL METH. CHURCH**

Title and Religious Denomination or Office

**2500 HARLEM AVENUE**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45080

LICENSE NO.

130757

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DAVID A GRANT

Age 23

Birthplace

MD.

(State)

Groom's  
Residence

1519 WINSTON AVE

Marital Status

SINGLE

Bride's  
Name

GAIL M GRANT

Age 22

Birthplace

MD.

(State)

Bride's  
Residence

1513 WINSTON AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

GEORGE A. CRAWLEY

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 27 85**

PASTOR - ST. PAUL BAPTIST

Title and Religious Denomination or Office

3101 THE ALAMEDA

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 5 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and for-  
warded to the Division of Vital Records, State Depart-  
ment of Health and Mental Hygiene, 201 W. Preston Street,  
Baltimore, MD 21201, upon receipt of page 3, copy of  
Certificate for Clerk of Court.

2

85-45081

## Certificate of Marriage

State of Maryland

LICENSE NO.

130753

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HARRY A. ABEY** Age **60** Birthplace **MD.**  
(State)

Groom's Residence **2239 EASTERN AVE.** Marital Status **DIVORCED**

Bride's Name **KATHLEEN M. LEWIS** Age **49** Birthplace **TENN.**  
(State)

Bride's Residence **2440 E. FAYETTE ST.** Marital Status **DIVORCED**

Relationship to groom if any **NONE**

License Date **NOV 27 85**

JW

CLYDE J. OXENDINE

Name of Officiating Clergy or Authorized Officer

EVANGELIST- NON-DENOMINATIONAL

Title and Religious Denomination or Office

5 NUBAY RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 5 1985License Fee \$ 55.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45082

LICENSE NO.

130719

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 30<sup>th</sup> day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>LARRY A. JACKSON</b>	Age	<b>28</b>	Birthplace	<b>KY.</b>
				(State)	
Groom's Residence	<b>3632 PASKIN PL. BALTO.CO.,MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>EILEEN R. BARNES</b>	Age	<b>24</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>3632 PASKIN PL. BALTO. CO.,MD.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

**MONTAQUE J. BRACKETT**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29 85**

**PASTOR- CENTRAL BAPTIST**

Title and Religious Denomination or Office

**3209 NORMOUNT AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985**

License Fee \$

**25<sup>00</sup>**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45083

## Certificate of Marriage

State of Maryland

LICENSE NO.

130718

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WILLIAM A LONG

Age 24Birthplace MD.  
(State)Groom's  
Residence

2424 SHIRLEY AVE

Marital Status SINGLEBride's  
Name

LILITA POPE

Age 21 Birthplace MD.  
(State)Bride's  
Residence

2424 SHIRLEY AVE

Marital Status SINGLE

Relationship to groom if any

NONE

THEODORE C. JACKSON

Name of Officiating Clergy or Authorized Officer

PASTOR- GILLIAS MEMORIAL CHURCH

Title and Religious Denomination or Office

4016 PARK HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 5 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$

25<sup>00</sup>

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45084

## Certificate of Marriage

State of Maryland

LICENSE NO.

130705

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name EDWARD BRIAN CUMMINGSAge 19 Birthplace MD.  
(State)

Groom's

Residence 509 ANNABEL AVENUEMarital Status SINGLE

Bride's

Name BONNIE SUE MILLERAge 21 Birthplace MD.  
(State)

Bride's

Residence 5419 GRADIN AVE. BALTO. CO., MD. Marital Status SINGLERelationship to groom if any NONEGEORGE M. MANHART

Name of Officiating Clergy or Authorized Officer

License Date NOV. 25 85ELDER - IMMANUEL UNITED METH.

Title and Religious Denomination or Office

506 ANNABEL AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 5 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45085

## Certificate of Marriage

State of Maryland

LICENSE NO.

130686

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ABRAM R. HILL

Age

36

Birthplace NEW YORK  
(State)Groom's  
Residence

130 MAYBIN CIRCLE BALTO. CO., MD.

Marital Status

SINGLE

Bride's  
Name

DEBRA L. WASHINGTON

Age

29

Birthplace CONN.  
(State)Bride's  
Residence

130 MAYBIN CIRCLE BALTO. CO., MD.

Marital Status

DIVORCED

Relationship to groom if any NONETHEODORE JACKSON, JR.

Name of Officiating Clergy or Authorized Officer

PASTOR- GILLIAS MEMORIAL COMM. CHURCH

Title and Religious Denomination or Office

4016 PARK HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 5 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

2

85-45086

## Certificate of Marriage

State of Maryland

LICENSE NO.

130682

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT L UZZELL JR**Age **20** Birthplace **MD.**  
(State)Groom's Residence **1907 LAURETTE AVE**Marital Status **SINGLE**Bride's Name **JACQUELINE O GIBSON**Age **24** Birthplace **MD.**  
(State)Bride's Residence **2912 PRESBURY ST**Marital Status **SINGLE**  
**NONE**

Relationship to groom if any

**RANDOLPH B. BROWN**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 21 85** **PASTOR- FREE WILL BAPT. CHURCH**

Title and Religious Denomination or Office

**811 N. GILMOR ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**NOV 26 1985****SAUNDRA E. BANKS, CLERK**

License Fee \$

**25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45087

LICENSE NO.

130578

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 30th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

GERALD E PIEPIORA

Age 38

Birthplace

MASS.

(State)

Groom's  
Residence

102 TENNYSON CT HARFORD CO MD

Marital Status

DIVORCED

Bride's  
Name

DENEISE J LANDIS

Age 35

Birthplace

MD.

(State)

Bride's  
Residence

102 TENNYSON CT HARFORD CO MD

Marital Status

DIVORCED

NONE

Relationship to groom if any

GUY ADDISON WENCK

Name of Officiating Clergy or Authorized Officer

PASTOR 1st &amp; ST. STEPHEN'S U C C

Title and Religious Denomination or Office

6915 YORK RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 5 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45088

## Certificate of Marriage

State of Maryland

LICENSE NO.

130525

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>TIMOTHY E. COLEMAN</b>	Age	<b>28</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>2513 CEDAR DR. BALTO.CO.,MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>KIM L. BRIGHT</b>	Age	<b>30</b>	Birthplace	<b>MI.</b>
				(State)	
Bride's Residence	<b>2513 CEDAR DR. BALTO.CO.,MD.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

**JERRY E. HARGROVE, JR.**

Name of Officiating Clergy or Authorized Officer

**PRIEST-CATHOLIC**

Title and Religious Denomination or Office

**920 11th ST. N.E. WASHINGTON 20002**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

## Certificate of Marriage

State of Maryland

85-45089

LICENSE NO.

130353

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID EUGENE PULLEY**Age **25** Birthplace **N.Y.**  
(State)Groom's Residence **3606 BLAIR AV. BALTO.CO.,MD**Marital Status **SINGLE**Bride's Name **CAROL LEIGH THOMAS**Age **24** Birthplace **MD.**  
(State)Bride's Residence **4310 MAINE AV.**Marital Status **SINGLE**Relationship to groom if any **NONE****THEODORE C. JACKSON, JR.**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 1****85 PASTOR- GILLIS MEMORIAL COMM. CHURCH**

Title and Religious Denomination or Office

**4016 PARK HEIGHTS AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45090

## Certificate of Marriage

State of Maryland

LICENSE NO.

129890

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9 day of November 1985

the following persons were by me united in marriage at

Balto, md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ISHMAEEL SAMUELS

Age 21

Birthplace MD.  
(State)Groom's  
Residence

2511 GARRISON BLVD

Marital Status SINGLE

Bride's  
Name

MICHELE M SMITH

Age 20 Birthplace MD.  
(State)Bride's  
Residence

2511 GARRISON BLVD

Marital Status SINGLE

Relationship to groom if any

NONE

Rev. William W. Payne  
Name of Officiating Clergy or Authorized Officer

License Date NOV. 7

85

Pastor  
Title and Religious Denomination or Office2401 Garrison Blvd.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 4 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45091

State of Maryland

LICENSE NO.

129473

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 30th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name ROBERT W. CONLEY

Age 30 Birthplace MD.  
(State)

Groom's

Residence 20 WALDRON AVE. BALTO. CO., MD.

Marital Status DIVORCED

Bride's

Name VENETTA TEANO

Age 33 Birthplace MD.  
(State)

Bride's

Residence 20 WALDRON AVE. BALTO. CO., MD.

Marital Status DIVORCED

Relationship to groom if any NONE

DAVID W. RIMBACH

Name of Officiating Clergyman or Authorized Officer

MINISTER- UNITED METH. CHURCH

License Date SEPT 23 85

jw

Title and Religious Denomination or Office

3449 FALLS RD.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

SAUNDRA E. BANKS, CLERK

Signature-Clerk of the Court

License Fee - Resident

Non-Resident \$

\$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45092

LICENSE NO.

130646

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30 <sup>th</sup> day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JOHN WESLEY MARINE

Age 72

Birthplace MD.  
(State)

Groom's Residence 1617 EARECKSON PLACE

Marital Status DIVORCED

Bride's Name ROMONA E. HARRIS

Age 57

Birthplace MD.  
(State)

Bride's Residence 1617 EARECKSON PLACE

Marital Status SINGLE

Relationship to groom if any NONE

AUSTIN BARNES

Name of Officiating Clergy or Authorized Officer

License Date NOV. 20 85

PASTOR- JOSEPH FREEWILL BAPT. CHURCH

Title and Religious Denomination or Office

tt

1601 RUTLAND AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

License Fee \$ 25.00

SAUNDRA E. BINKS  
Signature Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45093

LICENSE NO.  
130640

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JAMES A. HENDRICKS

Age 43 Birthplace N.C.  
(State)

Groom's Residence 8119 SUBET ROAD

Marital Status DIVORCED

Bride's Name PAULETTE T. JONES

Age 29 Birthplace MD.  
(State)

Bride's Residence 8119 SUBET ROAD

Marital Status SINGLE

Relationship to groom if any NONE

WALTER S. THPMAS

Name of Officiating Clergy or Authorized Officer

License Date NOV. 20 85

MINISTER- BAPTIST

Title and Religious Denomination or Office

TT

502 CATHEDRAL ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45094

## Certificate of Marriage

State of Maryland

LICENSE NO.

130629

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>ELBERT R. NUTTLE, 3RD.</b>	Age	<b>26</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>306 E. WELLINGBOROUGH WAY BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>KAREN R. AYRES</b>	Age	<b>27</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>306 E. WELLINGBOROUGH WAY BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE****RICHARD E. PARKS,**

Name of Officiating Clergy or Authorized Officer

**PASTOR- SACRED HEART OF MARY CHURCH**

Title and Religious Denomination or Office

**6736 YOUNGSTOWN AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985****SAUNDRA E. DAWKS, CLERK**

Signature - Clerk of the Court

License Date **NOV 21 85****JW**License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45095

## Certificate of Marriage

State of Maryland

LICENSE NO.

130623

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name RONALD LEE EKLUNDAge 32 Birthplace MD.  
(State)Groom's Residence 1615 CUBA STREETMarital Status DIVORCEDBride's Name BARBARA ANN CLINEAge 26 Birthplace IN.  
(State)Bride's Residence 1615 CUBA STREETMarital Status DIVORCEDRelationship to groom if any NONEMARK R. BOLING

Name of Officiating Clergy or Authorized Officer

PASTOR- BROOKLYN UNITED METH. CHURCH

Title and Religious Denomination or Office

401 PONTIAC AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 3 1985License Fee \$ 25.00SAUNDRA E. BARKS, CLERK  
Signature Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45096

## Certificate of Marriage

State of Maryland

LICENSE NO.

130604

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name RICHARD THOMAS RODGERS Age 28 Birthplace NEW YORK  
(State)

Groom's Residence 110 C DUMBARTON RD. BALTO. CO., MD. Marital Status SINGLE

Bride's Name KAREN ELIZABETH WEILAND Age 23 Birthplace MAINE  
(State)

Bride's Residence 110 C DUMBARTON RD. BALTO. CO., MD. Marital Status SINGLE

Relationship to groom if any NONE

License Date NOV. 19 85

ROBERT P. PATTERSON

Name of Officiating Clergy or Authorized Officer

RECTOR- CHURCH OF THE REDEEMER

Title and Religious Denomination or Office

5603 N. CHARLES ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985  
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

# Certificate of Marriage

State of Maryland

85-45097

LICENSE NO.

130575

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	JOSEPH A. COREY	Age	75	Birthplace	R.I.
Groom's Residence	1721 A. LESLIE AVE. BALTO.CO.,MD.	Marital Status	WIDOWER		
Bride's Name	JEAN D. ADAMS	Age	66	Birthplace	MD.
Bride's Residence	1721 A. LESLIE AVE. BALTO.CO.,MD.	Marital Status	WIDOW		
Relationship to groom if any	NONE				

RICHARD E. PARKS

Name of Officiating Clergy or Authorized Officer

PASTOR- SACRED HEART OF MARY CHURCH

Title and Religious Denomination or Office

6736 YOUNGSTOWN AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date NOV. 18 85

tt

License Fee \$ 25.00

2

# Certificate of Marriage

85-45098

## State of Maryland

 LICENSE NO.  
130072

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

 the following persons were by me united in marriage at BALTIMORE CITY  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 11:45  
 Groom's Name **CLARENCE MASSEY, JR.**

 Age **29** Birthplace **MD.**  
 (State)

 Groom's Residence **5303 MORAVIA ROAD**

 Marital Status **SINGLE**

 Bride's Name **SHERRY DELORES FORD**

 Age **26** Birthplace **N.C.**  
 (State)

 Bride's Residence **4215 WOODMERE AVENUE**

 Marital Status **SINGLE**

 Relationship to groom if any **NONE**
**MONTAQUE J. BRACKETT**

 License Date **OCT. 23 85**

Name of Officiating Clergy or Authorized Officer

**PASTOR- CENTRAL BAPT. CHURCH**

Title and Religious Denomination or Office

**3208 NORMPUNT AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985**  
**SAUNDRA E. BANKS, CLERK**

 License Fee \$ 35.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

# Certificate of Marriage

85-45099

## State of Maryland

 LICENSE NO.  
130498

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 30th day of NOVEMBER 19 85

 the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	MICHAEL BENJAMIN RODBELL	Age	26	Birthplace	WASH., D.C.
				<small>(State)</small>	
Groom's Residence	10 FLANDERS RIDGE CT. BALTO. CO. MD.	Marital Status	SINGLE		
Bride's Name	KATHRYN BAKER PETERS	Age	26	Birthplace	MARYLAND
				<small>(State)</small>	
Bride's Residence	10 FLANDERS RIDGE CT. BALTO. CO. MD.	Marital Status	SINGLE		

 Relationship to groom if any NONE
EDWARD KENNY, JR.
Name of Officiating Clergy or Authorized Officer

 License Date NOV. 14 85 PASTOR- ALL SAINTS CATHOLIC CHURCH
Title and Religious Denomination or Office
4408 LIBERTY HGTS. AVE.
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office

SAUNDRA E. DAVIS, CLERK

 License Fee \$ 25.00

Signature — Clerk of the Court



2

# Certificate of Marriage

State of Maryland

85-45100

LICENSE NO.

130485

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD THOMAS WALLACE**

Age **21** Birthplace **MD.**  
(State)

Groom's Residence **4005 REISTERSTOWN RD.**

Marital Status **SINGLE**

Bride's Name **DIANE BRIDGES**

Age **23** Birthplace **MD.**  
(State)

Bride's Residence **3838 COTTAGE AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**ELIJAH B. MC DANIEL, SR.**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 12 85**

**PASTOR- BAPTIST**

Title and Religious Denomination or Office

**5019 CHALGROVE AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985**

License Fee \$ 25.00

**SAUNDRA E. DARRAS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45101

## Certificate of Marriage

State of Maryland

LICENSE NO.

130480

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WALTER K. GRIFFIN**Age **23** Birthplace **MD.**  
(State)Groom's Residence **305 WILLIAMS RD. A.A. CO., MD.**Marital Status **SINGLE**Bride's Name **DEBORAH J. HECK**Age **22** Birthplace **MD.**  
(State)Bride's Residence **5 E. HEATH ST.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN L. LIPPOLD**

Name of Officiating Clergy or Authorized Officer

**PRIEST- CATHOLIC**

Title and Religious Denomination or Office

**1419 RIVERSIDE AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**  
**DEC 3 1985**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45102

## State of Maryland

LICENSE NO.

130463

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS HUEY GRAVES**

Age **21** Birthplace **RICHMOND, VA.**  
(State)

Groom's Residence **4201 PENHURST AV.**

Marital Status **SINGLE**

Bride's Name **TERESA YVONNE MC DANIELS**

Age **19** Birthplace **ALABAMA**  
(State)

Bride's Residence **2602 LOYOLA SOUTH WAY.**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**MANASSEH CROMARTIE**

Name of Officiating Clergy or Authorized Officer

License Date **NOV 14 85**

**BAPTIST**

Title and Religious Denomination or Office

**2010 W. NORTH AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45103

LICENSE NO.

130457

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ALAN C. LOMAN

Age 24 Birthplace NEW YORK  
(State)

Groom's Residence 1657 BURNWOOD ROAD

Marital Status SINGLE

Bride's Name KIMBERLY L. EDWARDS

Age 22 Birthplace DELAWARE  
(State)

Bride's Residence 6118 EVERALL AVENUE

Marital Status SINGLE

Relationship to groom if any NONE

RICHARD LYON WERELEY

Name of Officiating Clergy or Authorized Officer

License Date NOV 13 85

PASTOR- FAITH PRESBYTERIAN CHURCH

Title and Religious Denomination or Office

JW

5400 LOCH RAVEN BLVD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 3 1985

License Fee \$ 25.00

SANDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45104

## Certificate of Marriage

State of Maryland

LICENSE NO.

130383

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24<sup>th</sup> day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ERIC A PENDERGRASS

Age 24Birthplace MD.

(State)

Groom's  
Residence

5235 REISTERSTOWN RD

Marital Status

SINGLEBride's  
Name

LYNNETTE M HOLMES

Age 23Birthplace MD.

(State)

Bride's  
Residence

2610 LOYOLA NORTHWAY

Marital Status

SINGLE

Relationship to groom if any

NONE

ERA S. FERRELL

Name of Officiating Clergy or Authorized Officer

ASSOC. PASTOR- EMMANUEL CHURCH

Title and Religious Denomination or Office

1530 W. LEXINGTON ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

License Fee \$

35.00

SAUNDRA E. BANKS, CLERK

Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45105

State of Maryland

LICENSE NO.  
127327

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)***I Hereby Certify* that on the 30<sup>th</sup> day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	HYSON WILLIAMS	Age	62	Birthplace	MD.
				(State)	
Groom's Residence	1901 W. SARATOGA ST.	Marital Status	WIDOWER		
Bride's Name	MARGARET E. FARMER	Age	63	Birthplace	MD.
				(State)	
Bride's Residence	2124 W. SARATOGA ST.	Marital Status	WIDOW		

Relationship to groom if any

ELDER NELLIE BILLIPS

Name of Officiating Clergy or Authorized Officer

License Date JUNE 24 85

PASTOR- PENTECOSTAL FAITH

Title and Religious Denomination or Office

2705 W. MOSHER ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

License Fee \$

25<sup>00</sup>

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45106

## Certificate of Marriage

State of Maryland

LICENSE NO.  
129808

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27 day of November 1985

the following persons were by me united in marriage at

Balto, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>CHARLES RAYMOND SCRIBNER</b>	Age	<b>38</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>6863 PARSONS AVE. BALTO. CO., MD.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>DARLENE DIANA JONES</b>	Age	<b>34</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>6863 PARSONS AVE. BALTO. CO., MD.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**License Date **OCT 7****85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 1 21985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45107

# Certificate of Marriage

State of Maryland

LICENSE NO.  
130668

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27TH day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

RICHARD E. SMITH

Age 34

Birthplace

MD  
(State)

Groom's  
Residence

8309 HILLENDALE RD. BALTO.CO., MD

Marital Status DIVORCED

Bride's  
Name

MELINDA LOU MILLER

Age 33

Birthplace

TEXAS  
(State)

Bride's  
Residence

964 RADCLIFFE RD. BALTO.CO., MD

Marital Status DIVORCED

Relationship to groom if any

NONE

REV. ROY A. MAACK

Name of Officiating Clergy or Authorized Officer

PASTOR CALVARY LUTHERAN

Title and Religious Denomination or Office

N. PK. WY. & OLD HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 0 4 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and for-  
warded to the Division of Vital Records, State Depart-  
ment of Health and Mental Hygiene, 201 W. Preston Street,  
Baltimore, MD 21201, upon receipt of page 3, copy of  
Certificate for Clerk of Court.



2

85-45108

## Certificate of Marriage

State of Maryland

LICENSE NO.

130688

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29TH day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **CURTIS EDWARD WILLIAMS**Age **23** Birthplace **MD.**  
(State)Groom's  
Residence **2309 BARCLAY STREET**Marital Status **SINGLE**Bride's  
Name **ZINA DENISE LAWRENCE**Age **21** Birthplace **MD.**  
(State)Bride's  
Residence **418 PITMAN PLACE**Marital Status **SINGLE**Relationship to groom if any **NONE****ROOSEVELT BOND**

License Date

**NOV 22 85****BAPTIST**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

**1720 BRENTWOOD AV.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

License Fee \$

**25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45109

LICENSE NO.

130727

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 30TH day of NOVEMBER 1985

BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**JOHN D GARY SR**

Age **68**

Birthplace

**MD.**

(State)

Groom's  
Residence

**1335 W 42ND STREET**

Marital Status

**WIDOWER**

Bride's  
Name

**MILDRED G OREM**

Age **72**

Birthplace

**PA.**

(State)

Bride's

Residence

**1426 MORELAND AVE**

Marital Status

**WIDOW**

**NONE**

Relationship to groom if any

**REV. MILTON HIPSLEY**

Name of Officiating Clergy or Authorized Officer

**ROMAN CATHOLIC PRIEST**

Title and Religious Denomination or Office

**ST. THOMAS AQUINAS CHURCH**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 04 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

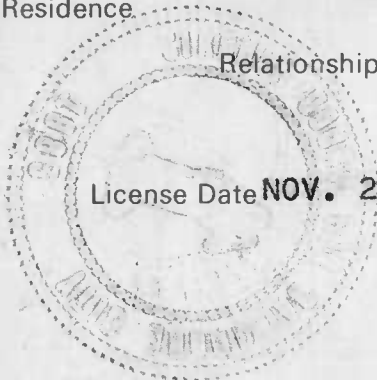
License Date **NOV. 25,**

**85**

License Fee \$

**25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45110

## Certificate of Marriage

State of Maryland

LICENSE NO.

130743

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29TH day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOHN W. WEST

Age 22 Birthplace MD.

(State)

Groom's  
Residence

2713 HAMPDEN AVENUE

Marital Status SINGLEBride's  
Name

SUSAN A. BROWN

Age 21 Birthplace MD.

(State)

Bride's  
Residence

2713 HAMPDEN AVENUE

Marital Status SINGLERelationship to groom if any NONEREV. GEORGE V. JOHNSON

Name of Officiating Clergy or Authorized Officer

License Date NOV 26.

85

ORDAINED MINISTER CHURCH OF GOD

Title and Religious Denomination or Office

2913 HUNTINGDON AV. CITY

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DECO 4/1985

License Fee \$

25.75SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45111

## Certificate of Marriage

State of Maryland

LICENSE NO.

130750

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name STEVEN MC CULLOUGHAge 21 Birthplace MD.  
(State)

Groom's

Residence 1331 N. MILTON AVE.Marital Status SINGLER

Bride's

Name DEBORAH JEAN ADDISONAge 20 Birthplace MD.  
(State)

Bride's

Residence 1402 N. LUZERNE AVE.Marital Status SINGLERelationship to groom if any NONE

REV. EARL NATHAN WOODARD

Name of Officiating Clergy or Authorized Officer

PASTOR-DAVID MEMORIAL BAPTIST CHURCH

Title and Religious Denomination or Office

1401-5 NORTH WILTON AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 0 4 1985License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45112

## Certificate of Marriage

State of Maryland

LICENSE NO.

130768

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of NOVEMBER, 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

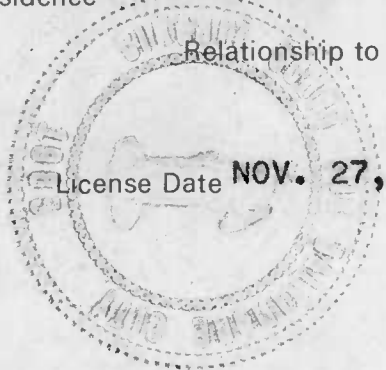
Groom's Name **THOMAS W. LONG** Age **20** Birthplace **MD.**  
(State)

Groom's Residence **11 WESTBURY RD. BALTO.CO., MD.** Marital Status **SINGLE**

Bride's Name **KRISTIN L. UNDERRINER** Age **18** Birthplace **MASS.**  
(State)

Bride's Residence **3329 JOANN LA. HARFORD CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**



WAYNE L. HARTING

Name of Officiating Clergy or Authorized Officer

85 PASTOR-FIRST CHURCH OF GOD OF BALTIMORE

Title and Religious Denomination or Office

4801 SIPPLE AV. BALTO., MD 21206

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 0 4 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45113

State of Maryland

LICENSE NO.  
130786

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

EMANUEL SPENCE

Age 48

Birthplace MD.  
(State)

Groom's  
Residence

313 E 23RD STREET

Marital Status

**DIVORCED**

Bride's  
Name

ROBERTA E ALLEN

Age 37

Birthplace MD.  
(State)

Bride's  
Residence

313 E 23RD STREET

Marital Status

**DIVORCED**

**NONE**

Relationship to groom if any

MAMIE A. WILLIAMS

Name of Officiating Clergy or Authorized Officer

PASTOR-CENTENNIAL UMC

Title and Religious Denomination or Office

1029 E. MONUMENT ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 0 4 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date **NOV. 27,**

**85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45114

# Certificate of Marriage

State of Maryland

LICENSE NO.

130825

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>RUFUS DAWSON , JR.</b>	Age	<b>24</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>3211 LYNDAL AVE.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>BARBARA G. BILLUPS</b>	Age	<b>29</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>1300 CROFTON RD.</b>	Marital Status	<b>DIVORCED</b>		

Relationship to groom if any **NONE**

**DUANE D. DE GROFF**

Name of Officiating Clergy or Authorized Officer

**PASTOR- GREGORY MEMORIAL BAPT. CHURCH**

Title and Religious Denomination or Office

**115 E. LAKE AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 4 1985**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45115

## Certificate of Marriage

State of Maryland

LICENSE NO.

130831

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**David P. Roesler**Age 20 Birthplace Md.  
(State)Groom's  
Residence**8543 King Ridge Rd. Balto. Co., Md.**Marital Status **Single**Bride's  
Name**Karen M. Burgess**Age 19 Birthplace Md.  
(State)Bride's  
Residence**4705 Parkwood Ave.**Marital Status **Single**Relationship to groom if any **None**WILLIAM T. MILLER

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29** **85**CLERGY- METHODIST

Title and Religious Denomination or Office

4400 PARKSIDE DR.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 4 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45116

State of Maryland

LICENSE NO.

130634

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 23rd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM E RUFFIN**

Age **25** Birthplace **MD.**  
(State)

Groom's Residence **2917 POPLAR TERR**

Marital Status **SINGLE**

Bride's Name **KAREN T WOLFE**

Age **24** Birthplace **MD.**  
(State)

Bride's Residence **2917 POPLAR TERR**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**DONALD O. WILSON**

Name of Officiating Clergy or Authorized Officer

**RECTOR- ST. JAMES EP. CHURCH**

Title and Religious Denomination or Office

License Date

**NOV. 22 85**

**JW**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 4 1985**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45117

## Certificate of Marriage

State of Maryland

LICENSE NO.

130554

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CLEMENT D. ERHARDT , 3RD.** Age **24** Birthplace **MD.**  
(State)

Groom's Residence **8509 LONDON BRIDGE WAY BALTO.CO.,MD.** Marital Status **SINGLE**

Bride's Name **MELANIE A. JEDLICKA** Age **26** Birthplace **MD.**  
(State)

Bride's Residence **101 E. PADONIA RD. BALTO.CO.,MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

**ALLEN NOVOTNY**

Name of Officiating Clergy or Authorized Officer

**PRIEST- ROMAN CATHOLIC**

Title and Religious Denomination or Office

**LOYOLA COLLEGE- 4501 N. CHARLES ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 4 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45118

## Certificate of Marriage

State of Maryland

LICENSE NO.

130502

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name EUGENE S. G. NEALAge 52 Birthplace LOUISIANA  
(State)Groom's  
Residence 737 W. LEXINGTON STREETMarital Status SINGLEBride's  
Name DORA HELEN WILLIAMSAge 50 Birthplace S. CAROLINA  
(State)Bride's  
Residence 737 W. LEXINGTON STREETMarital Status SINGLERelationship to groom if any NONEW.K. WOODS

Name of Officiating Clergy or Authorized Officer

License Date

NOV 12 85PASTOR- PROTESTANT

Title and Religious Denomination or Office

2144 MT. ROYAL TERRACE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 4 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature of Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45119

# Certificate of Marriage

State of Maryland

LICENSE NO.

130470

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17<sup>th</sup> day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	VINCENT MARANTO	Age	26	Birthplace	MD.
				(State)	
Groom's Residence	1101 PROSPECT MILL RD. HARFORD CO., MD.	Marital Status	SINGLE		
Bride's Name	KIMBERLY M. KLEIN	Age	24	Birthplace	MD.
				(State)	
Bride's Residence	1101 PROSPECT MILL RD. HARFORD CO., MD.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

License Date NOV 12 85  
JW

GERARD J. BOWEN

Name of Officiating Clergy or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

5310 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

DEC 4 1985  
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and for-  
warded to the Division of Vital Records, State Depart-  
ment of Health and Mental Hygiene, 201 W. Preston Street,  
Baltimore, MD 21201, upon receipt of page 3, copy of  
Certificate for Clerk of Court.

2

85-45120

## Certificate of Marriage

State of Maryland

LICENSE NO.

130450

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CEDRIC GARLAND LOGAN

Age 29 Birthplace MD.  
(State)Groom's  
Residence

1931 AISQUITH STREET

Marital Status SINGLEBride's  
Name

DARLENE GREEN

Age 28 Birthplace MD.  
(State)Bride's  
Residence

1685 DARLEY AVENUE

Marital Status SINGLERelationship to groom if any NONE

MAXWELL JOHNSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 8 85

PASTOR- NEW LIFE MISSIONARY BAPT. CHURCH

Title and Religious Denomination or Office

1107 SHERWOOD AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 4 1985SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45121

## Certificate of Marriage

State of Maryland

LICENSE NO.

130812

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29<sup>th</sup> day of November 1985the following persons were by me united in marriage at Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **GEORGE LINK**Age **28** Birthplace **MD.**

Groom's

Residence **1744 CLARKSON ST.**Marital Status **SINGLE**

Bride's

Name **JOYCE ELAINE PHILLIPS**Age **22** Birthplace **MD.**

Bride's

Residence **1744 CLARKSON ST.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 29**

85

A. Neumann Banninger

Name of Officiating Clergy or Authorized Officer

Priest

Title and Religious Denomination or Office

7613. Water Oak Point Rd 21122

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45122

## Certificate of Marriage

State of Maryland

LICENSE NO.

130775

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30<sup>th</sup> day of November 19 85

the following persons were by me united in marriage at

Baltimore, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>MICHAEL D. WINSTON</b>	Age	<b>29</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>7046 MC CLEAN BLVD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>CYNTHIA F. EDWARDS</b>	Age	<b>27</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>7046 MC CLEAN BLVD.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**License Date **NOV. 27 85**

Rev. Mark A. Riddick  
Name of Officiating Clergy or Authorized Officer  
Pastor - Mt Zion Baptist Church  
Title and Religious Denomination or Office  
3632. Forest Garden drive.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45123

## Certificate of Marriage

State of Maryland

LICENSE NO.

130356

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name SAMUEL LEWIS SMILEYAge 39 Birthplace MD.  
(State)Groom's Residence 523 E. 22nd STREETMarital Status DIVORCEDBride's Name BERNADINE ESTHER SCOTTAge 41 Birthplace MD.  
(State)Bride's Residence 523 E. 22nd STREETMarital Status DIVORCEDRelationship to groom if any NONEVERNON M. DOBSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 4 85MINISTER- UNION BAPTIST CHURCH

Title and Religious Denomination or Office

3401 CEDARDALE RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 9 1985SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

TT



2

85-45124

## Certificate of Marriage

State of Maryland

LICENSE NO.

130570

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WILLIAM E. PITTS

Age 38

Birthplace

MD.

(State)

Groom's  
Residence

1137 ASHBURTON ST.

Marital Status

SINGLE

Bride's  
Name

JANET A. THAXTON

Age 29

Birthplace

MD.

(State)

Bride's  
Residence

2900 WINCHESTER ST.

Marital Status

SINGLE

Relationship to groom if any

NONE

VERNON N. DOBSON

Name of Officiating Clergy or Authorized Officer

MINISTER - UNION BAPTIST CHURCH

Title and Religious Denomination or Office

3401 CEDAEDALE RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 9 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date NOV 18 85

jw

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45125

## Certificate of Marriage

State of Maryland

LICENSE NO.

130582

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES STOKES ,JR.**Age **52** Birthplace **MD.**  
(State)Groom's Residence **4133 NORFOLK AVE.**Marital Status **DIVORCED**Bride's Name **BERTHA M. HOUSE**Age **40** Birthplace **MD.**  
(State)Bride's Residence **4133 NORFOLK AVE.**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOHN T. CRUMMEDY**

Name of Officiating Clergy or Authorized Officer

**PASTOR- SWEET HOPE FREE WILL BAPT. CHURCH**

Title and Religious Denomination or Office

**316 NORTH FULTON AVENUE**

Address of Clergy or Authorized Officer

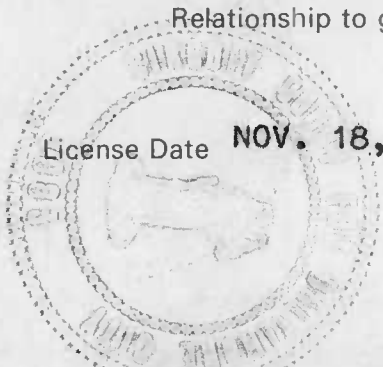
CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 9 1985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45126

## State of Maryland

LICENSE NO.

130697

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22nd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES H. MURRAY**

Age **42** Birthplace **MS.**  
(State)

Groom's Residence **13401 BLYTHENIA RD. BALTO.CO., MD**

Marital Status **DIVORCED**

Bride's Name **LYDIA R. POWELL**

Age **33** Birthplace **MD.**  
(State)

Bride's Residence **10306 MALCOLM CIR. BALTO.CO., MD**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**VERNON N. DOBSON**

Name of Officiating Clergy or Authorized Officer

**MINISTER- UNION BAPT. CHURCH**

Title and Religious Denomination or Office

**3401 CEDARDALE RD.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 9 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$

**25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45127

## Certificate of Marriage

State of Maryland

LICENSE NO.

130762

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ROBERT A GRIFFIN

Age

55

Birthplace

N CAR

(State)

Groom's  
Residence

514 N STRICKER ST

Marital Status

SINGLE

Bride's  
Name

ETHEL M RICE

Age

53

Birthplace

VA

(State)

Bride's  
Residence

514 N STRICKER ST

Marital Status

DIVORCED

Relationship to groom if any

NONE

ROOSEVELT T. BOND

Name of Officiating Clergy or Authorized Officer

PASTOR- BAPTIST

Title and Religious Denomination or Office

1720 BRENTWOOD AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 9 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date NOV. 27 85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45128

State of Maryland

LICENSE NO.

130806

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 30th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **CHARLES KIMBROW, JR.**Age **25** Birthplace **MD.**  
(State)

Groom's

Residence **903 NOTTINGHAM ROAD**Marital Status **SINGLE**

Bride's

Name **ROYALETTE DIANN SMITH**Age **25** Birthplace **MD.**  
(State)

Bride's

Residence **4216 FAIRVIEW AVENUE**Marital Status **SINGLE**

Relationship to groom if any

**NONE****DARNEAL F. JOHNSON, JR.**

Name of Officiating Clergy or Authorized Officer

**PASTOR- WAYLAND BAPT. CHURCH**

Title and Religious Denomination or Office

**3200 GARRISON BLVD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 9 1985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date

**NOV. 29 85**

License Fee \$

**25.00**

This copy to be held by the Clerk of the Court, and for-  
warded to the Division of Vital Records, State Depart-  
ment of Health and Mental Hygiene, 201 W. Preston Street,  
Baltimore, MD 21201, upon receipt of page 3, copy of  
Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45129

LICENSE NO.

130102

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 9TH day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL FRANCIS MEYERS**

Age **28** Birthplace **MD.**  
(State)

Groom's Residence **1232 CLEVELAND ST.**

Marital Status **SINGLE**

Bride's Name **DONNA LEE SCHULTZ**

Age **25** Birthplace **MD.**  
(State)

Bride's Residence **1232 CLEVELAND ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**REV. RICHARD G. BRYANT**

Name of Officiating Clergy or Authorized Officer

**PRIEST THE EPISDPOL CHURCH**

Title and Religious Denomination or Office

**1301 S. CHARLES ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45130

## Certificate of Marriage

State of Maryland

LICENSE NO.

130553

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS JAMES CANNALIATO** Age **23** Birthplace **MD.**  
(State)Groom's Residence **1105 TIMBERLEA DR. BELAIR, MD** Marital Status **SINGLE**Bride's Name **ANN CATHERINE FLYNN** Age **23** Birthplace **MD.**  
(State)Bride's Residence **1308 N. CHAPELGATE LANE** Marital Status **SINGLE**Relationship to groom if any **NONE****RAPHAEL AMRHEIN**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 20 85****PRIEST- ROMAN CATHOLIC**

Title and Religious Denomination or Office

**3800 FREDERICK AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 10 1985**License Fee \$ **25.00****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45131

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130476

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name KEVIN ROBERT KELLAR Age 31 Birthplace MD.  
(State)Groom's Residence 3207 TUFTON AVE. BALTO. CO., MD. Marital Status SINGLEBride's Name JULIA LYNNE CAMPBELL Age 24 Birthplace MD.  
(State)Bride's Residence 817 KINGSTON ROAD BALTO. CO., MD. Marital Status SINGLERelationship to groom if any NONEMICHAEL L. BARNES

Name of Officiating Clergy or Authorized Officer

License Date NOV 26 85ASSOC. PASTOR- ROMAN CATHOLIC

Title and Religious Denomination or Office

6428 YORK RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 10 1985SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45132

LICENSE NO.

130647

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**ROBERT M ALBIKER**

Age 21  
22

Birthplace

**MD.**

(State)

Groom's  
Residence

**2200 ST LUKES LA BALTO CO MD**

Marital Status

**SINGLE**

Bride's  
Name

**KIMBERLY L HOLSINGER**

Age 17

Birthplace

**N J**

(State)

Bride's  
Residence

**2200 ST LUKES LA BALTO CO MD**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

**WILLIAM T. MILLER**

Name of Officiating Clergy or Authorized Officer

**CLERGY- METHODIST**

Title and Religious Denomination or Office

**4400 PARKSIDE DR.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 20 1985**

**SAUNDRA E. BANKS, CLERK**

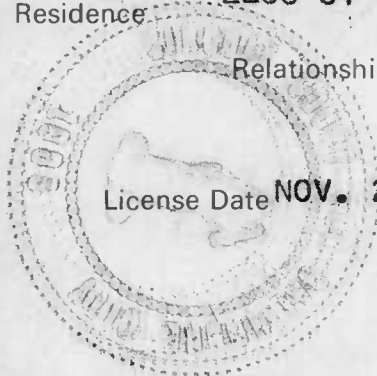
Signature - Clerk of the Court

License Date **NOV. 21,**

**85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45133

## Certificate of Marriage

State of Maryland

LICENSE NO.

130632

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MILBURN W DOUGLAS**Age **49** Birthplace **MD.**  
(State)Groom's Residence **3004 ROSALIND AVE**Marital Status **DIVORCED**Bride's Name **BARBARA F HOLMAN**Age **46** Birthplace **MD.**  
(State)Bride's Residence **3004 ROSALIND AVE**Marital Status **DIVORCED**Relationship to groom if any **NONE****GREGORY C. TURNER**

Name of Officiating Clergy or Authorized Officer

**PASTOR ST. JOHN BAPTIST CHURCH**

Title and Religious Denomination or Office

**2929 DUPONT AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **NOV. 20 85**License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45134

## Certificate of Marriage

State of Maryland

LICENSE NO.

130702

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DAVID B MINNICK

Age 27

Birthplace

MASS

(State)

Groom's  
Residence

9326 SPARROW VALLEY DR MONT CO MD

Marital Status

SINGLE

Bride's  
Name

VIRGINIA L PRINGLE

Age

30

Birthplace

MICH

(State)

Bride's  
Residence

9043 COTEE RD P.G.CO.MD.

Marital Status

SINGLE

Relationship to groom if any

NONE

AMERICO DI NORCIA

Name of Officiating Clergy or Authorized Officer

PASTOR- ROMAN CATHOLIC

Title and Religious Denomination or Office

201 SOUTH FREDERICK AVE. GAITHERSBURG, MD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 10 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45135

## Certificate of Marriage

State of Maryland

LICENSE NO.

130414

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JAMES DOUGLAS CAMPBELL, JR.**Age **31** Birthplace **MD.**  
(State)Groom's Residence **2533 MARBOURNE AVENUE**Marital Status **DIVORCED**Bride's Name **MARIE CHRISTINE BROOKS**Age **27** Birthplace **MD.**  
(State)Bride's Residence **2533 MARBOURNE AVENUE**Marital Status **DIVORCED**Relationship to groom if any **NONE****RICHARD G. BRYANT**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 7****85****PRIEST EPISCAL CHURCH**

Title and Religious Denomination or Office

**TT****1301 S. CHARLES ST. 21230**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 11 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45136

## Certificate of Marriage

State of Maryland

LICENSE NO.

129867

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 29th day of NOVEMBER 19 85  
BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DIETER H KIESEL

Age 29 Birthplace GERMANY  
 (State)

Groom's  
Residence

3228 FOSTER AVE

Marital Status SINGLE

Bride's  
Name

CHARLOTTE R NORANBROCK

Age 23 Birthplace MD.  
 (State)

Bride's  
Residence

806 S KENWOOD AVE

Marital Status SINGLE

Relationship to groom if any

NONE

REV. BERNARD J. BAUMGARTNER C. SSR.

Name of Officiating Clergy or Authorized Officer

CATHOLIC PARISH PRIEST

Title and Religious Denomination or Office

6420 E. PRATT ST. BALTIMORE, MD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DECO 2 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45137

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130090

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 26th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **COLLINS LINWOOD JOHNSON**Age **47**Birthplace **MD.**  
(State)Groom's Residence **900 HYDE PARK RD. BALTO.CO.,MD**Marital Status **DIVORCED**Bride's Name **GAIL GLENN**Age **39**Birthplace **MD,**  
(State)Bride's Residence **930 BENGIS RD. MIDDLE RIVER, MD.**Marital Status **SINGLE**Relationship to groom if any **NONE****ELDER ROGERS E. COFIELD**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 17****85 PASTOR, ST. JOHN APOSTOLIC CHURCH**

Title and Religious Denomination or Office

**1440 MAPLE AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that this is a true and correct record filed in this

office on

**DEC 02 1985**  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45138

## Certificate of Marriage

State of Maryland

LICENSE NO.

130258

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BRIAN LEE WILLNER**Age **28** Birthplace **MD.**  
(State)Groom's Residence **1305 CAMBRIA ST.**Marital Status **SINGLE**Bride's Name **JACKLYN LEE KELLY**Age **29** Birthplace **MD.**  
(State)Bride's Residence **519 HOLY CROSS RD. A.A.CO., MD**Marital Status **SINGLE**Relationship to groom if any **NONE**

REV. MICHAEL J. ORCHIK

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 25 85**

PASTOR, ST. ROSE OF LIMA

Title and Religious Denomination or Office

3803 4th ST. BALTO, MD 21225

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**DEC 02 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45139

## Certificate of Marriage

State of Maryland

LICENSE NO.

130264

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MICHAEL C. MILBURNAge 30 Birthplace MD.  
(State)Groom's Residence 5634 BELAIR ROADMarital Status SINGLEBride's Name MARY E. CRIVELLOAge 28 Birthplace MD.  
(State)Bride's Residence 6516 BELLE VISTA AVENUEMarital Status SINGLERelationship to groom if any NONEDAVID LEARY

Name of Officiating Clergy or Authorized Officer

License Date NOV. 4, 85PASTO, SHRINE OF LITTLE FLOWER R.C. CHURCH

Title and Religious Denomination or Office

2854 BRENDON AV. BALTIO. MD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 02 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45140

LICENSE NO.

130347

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23rd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>GUS J STRATAKIS</b>	Age	<b>25</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>1201 COWPENS AVE BALTO CO MD</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>ATHENA M SOULIKAS</b>	Age	<b>20</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>1615 GRAYHAVEN CT BALTO CO MD</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **NOV. 6, 85**

**REV. GEORGE E. KALPAXIS**

Name of Officiating Clergy or Authorized Officer

**PASTOR. ST NICHOLAS GREEK ORTHODOX CHURCH**

Title and Religious Denomination or Office

**520 S. PONCA ST. BALTIMORE, MD. 21224**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **DEC 02 1985**

**SAUNDRA E. BANKS, CLERK**

License Fee \$ **25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45141

## State of Maryland

LICENSE NO.

130352

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 28th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RILEY BROOKS** Age **69** Birthplace **N. C.**  
(State)

Groom's Residence **1402 N. DECKER AVENUE** Marital Status **DIVORCED**

Bride's Name **DORIS A. DANIELS** Age **42** Birthplace **N. C.**  
(State)

Bride's Residence **1402 N. DECKER AVENUE** Marital Status **DIVORCED**

Relationship to groom if any **NONE**

BISHOP AUSTIN BARNES

Name of Officiating Clergy or Authorized Officer

ST. JOSEPH F. W. B. CHURCH

Title and Religious Denomination or Office

1601 RUTLAND AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office of

**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45142

## Certificate of Marriage

State of Maryland

LICENSE NO.

130420

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JONATHAN BOYD

Age 22

Birthplace MD.  
(State)Groom's  
Residence

1722 N COLLINGTON AVE

Marital Status SINGLE

Bride's  
Name

SYLVIA E JOHNSON

Age 31 Birthplace MD.  
(State)Bride's  
Residence

1923 E HOFFMAN ST

Marital Status DIVORCED

Relationship to groom if any

NONE

License Date

NOV 6 85

JW

REV. CLAVERON E. BURSTON

Name of Officiating Clergy or Authorized Officer

PASTOR, BAPTIST CHURCH

Title and Religious Denomination or Office

1216 WOODBOURNE AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 02 1985

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45143

## Certificate of Marriage

State of Maryland

LICENSE NO.

130616

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 25th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **PHILLIP HOMER WHITE**Age **43**Birthplace **DELAWARE**  
(State)

Groom's

Residence **2229 EUTAW PLACE**Marital Status **DIVORCED**

Bride's

Name **ETHEL V. POWELL**Age **56**Birthplace **N. CAROLINA**  
(State)

Bride's

Residence **5521 PRICE AVENUE**Marital Status **WIDOW**Relationship to groom if any **NONE**PASTOR, GEORGE J. JOHNSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 20 85**MINISTER,

Title and Religious Denomination or Office

tt

2626 HURLY AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45144

## Certificate of Marriage

State of Maryland

LICENSE NO.

130133

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TIMOTHY LEE HANNAN**Age **22** Birthplace **VA.**  
(State)Groom's Residence **603 HEMINGWAY DR. BELAIR, MD.**Marital Status **SINGLE**Bride's Name **DEBRA MARIE RICHARDSON**Age **23** Birthplace **WISCONSIN**  
(State)Bride's Residence **105 S. HICKORY AV. BELAIR, MD**Marital Status **SINGLE**Relationship to groom if any **NONE**

REV. JOHN T. WIELEBSKI

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 1,****85****PRIEST OF THE ROMAN CATHOLIC CHURCH**

Title and Religious Denomination or Office

**st. DOMINIC, 5310 HARFORD RD. BALTO, MD 21214**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

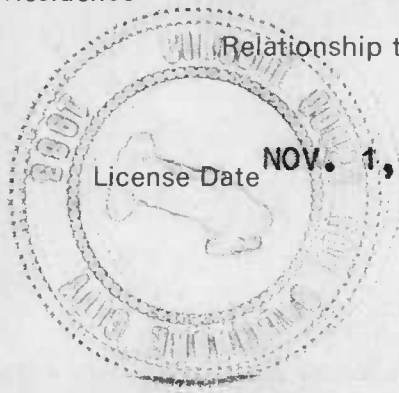
office on

**DEC 3 1985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45145

LICENSE NO.

130801

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **RANDOLPH CHARLES COVELLY**

Age **25**

Birthplace

**MD.**

(State)

Groom's

Residence **1-D SPRINGHEAD COURT. BALTO.CO.,MD**

Marital Status **SINGLE**

Bride's

Name **LAURA JEAN BENTON**

Age **20**

Birthplace

**MD.**

(State)

Bride's

Residence **608 COLLEGE AV. BALTO.CO.,MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**ROBERT C. Cartwright**

Name of Officiating Clergy or Authorized Officer

**PASTOR MT WASHINGTON UNITED METHODIST**

Title and Religious Denomination or Office

**226 BRACKENWOOD CT. TIMONIUM,MD. 21093**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$

**25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45146

## Certificate of Marriage

State of Maryland

LICENSE NO.

130660

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 25th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **WALLACE BROOKS**Age **25** Birthplace **MD.**  
(State)Groom's  
Residence **1137 N. CAREY ST.**Marital Status **SINGLE**Bride's  
Name **VICTORIA C. AMES**Age **38** Birthplace **MD.**  
(State)Bride's  
Residence **1609 BRUCE COURT.**Marital Status **DIVORCED**Relationship to groom if any **NONE****ALTHERIA FRAZIER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV 22 85****EVANG.-APOSTOLIC FAITH CHURCH**

Title and Religious Denomination or Office

**2114 ALLENDALE RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985**

License Fee \$

**25.00****SAUNDRA E. BANKS CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45147

## Certificate of Marriage

State of Maryland

LICENSE NO.

130659

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>SIDNEY GOLD</b>	Age	<b>28</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>13 COLUMBINE CT. BALTO.CO.,MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>LINDA L. WARD</b>	Age	<b>23</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>6709 MT. VERNON AVE.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE****ALVIN DONALD**

Name of Officiating Clergy or Authorized Officer

**CANTOR- TEMPLE EMANUEL -JEWISH**

Title and Religious Denomination or Office

**6605 PARK HEIGHTS AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date

**NOV. 21, 85**License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





85-45148

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130654

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27<sup>th</sup> day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MELVIN ALONZA TRAVERS**Age **52** Birthplace **MD.**  
(State)Groom's Residence **1102 MT. HOLLY ST.**Marital Status **SINGLE**Bride's Name **RUTH MARY SCOTT**Age **33** Birthplace **MD.**  
(State)Bride's Residence **1102 MT. HOLLY ST.**Marital Status **DIVORCED**Relationship to groom if any **NONE****MONROE R. AUNDERS, SR.**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 25 85** **BISHOP- 1st UNITED CHURCH OF JESUS CHRIST**

Title and Religious Denomination or Office

**3002 N. HILTON ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985**  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45149

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130622

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name IRA J. ROPSONAge 27 Birthplace WISCONSIN  
(State)Groom's Residence 116 W. UNIVERSITY PKWY.Marital Status SINGLEBride's Name PAULA M. DALESSIOAge 31 Birthplace NEW YORK  
(State)Bride's Residence 116 W. UNIVERSITY PKWY.Marital Status SINGLERelationship to groom if any NONETHOMAS J. GOZVERE

Name of Officiating Clergy or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

ST. PHILIP & JAMES

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 2 1985  
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date NOV. 22 85

tt

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45150

LICENSE NO.

130615

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DONALD EUGENE RUSSELL, SR.**

Age **57** Birthplace **INDIANA**  
(State)

Groom's Residence **615 RADNOR AVENUE**

Marital Status **WIDOWER**

Bride's Name **JUANITA MURDEN**

Age **50** Birthplace **GEORGIA**  
(State)

Bride's Residence **4014 FERNHILL AVENUE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**ALFREDO L. COYET**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 20 85**

**VICAR**

Title and Religious Denomination or Office

**560 N. BROADWAY**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

tt

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45151

## Certificate of Marriage

State of Maryland

LICENSE NO.

130612

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TIMOTHY MARSHALL**Age **21** Birthplace **MD.**  
(State)Groom's Residence **1812 W. FAYETTE STREET**Marital Status **SINGLE**Bride's Name **DONITA MATTHEWS**Age **20** Birthplace **MD.**  
(State)Bride's Residence **1714 BARNES STREET**Marital Status **SINGLE**Relationship to groom if any **NONE****EDDIE G. PRESSLEY**License Date **NOV 18 85**

Name of Officiating Clergy or Authorized Officer

**PENTECOSTAL HOLINESS**

Title and Religious Denomination or Office

**820 N. GLOVER ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45152

## Certificate of Marriage

State of Maryland

LICENSE NO.

130606

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29<sup>th</sup> day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

PETER J WILKINSON

Age 25Birthplace ENGLAND  
(State)Groom's  
Residence

3121 GUILFORD AVE

Marital Status

SINGLEBride's  
Name

MARILYN I WOLF

Age 26Birthplace IND.  
(State)Bride's  
Residence

3121 GUILFORD AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

LESLIE E. WERNER, SR.

Name of Officiating Clergy or Authorized Officer

CLERGY- UNITED METH. CHURCH

Title and Religious Denomination or Office

3708 ELKADER RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on DEC 2 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

# Certificate of Marriage

State of Maryland

85-45153

LICENSE NO.

130598

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>ROBERT L. WALKER</b>	Age	<b>49</b>	Birthplace	<b>MD.</b>
Groom's Residence	<b>1602 COLE ST.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>CHARLENE F. THOMPSON</b>	Age	<b>42</b>	Birthplace	<b>MD.</b>
Bride's Residence	<b>1602 COLE ST.</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **NOV. 18 85**

tt

**EUGENE W. HOLDINESS**

Name of Officiating Clergy or Authorized Officer

**ASSEMBLIES OF GOD**

Title and Religious Denomination or Office

**1533 COLE ST.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985**

License Fee \$ 25 00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

2

# Certificate of Marriage

State of Maryland

85-45154

LICENSE NO.  
130748

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28TH. day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**RICKY L LITTLE**

Age **23**

Birthplace **N CAR**  
(State)

Groom's  
Residence

**922 BENNET PL**

Marital Status

**SINGLE**

Bride's  
Name

**CHARLENE V WARD**

Age **24** Birthplace

**MD.**

Bride's  
Residence

**3443 SPELMAN RD**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

License Date **NOV. 25**

**85**

*Naomi Durant*

Name of Officiating Clergy or Authorized Officer

*Minister*

Title and Religious Denomination or Office

*1 Belle Forte Ct.*

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985**

**SAUNDRA E. BANKS, CLERK**

License Fee \$

**25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45155

LICENSE NO.

130650

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 29TH. day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILBUR ROBERT EASTON**

Age **19** Birthplace **MD.**  
(State)

Groom's Residence **7856-K BRUTON DR. A.A.CO., MD**

Marital Status **SINGLE**

Bride's Name **BARBARA ANN PATRICK**

Age **23** Birthplace **MD.**  
(State)

Bride's Residence **7856-K BRUTON DR. A.A.CO., MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

REV. L. BRANDON COOK

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 26 85**

MINISTER- CHURCH OF GOD

Title and Religious Denomination or Office

901 WASHBURN AVE. # 21225

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

tt

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45156

## Certificate of Marriage

State of Maryland

LICENSE NO.

130666

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name RUDOLPH HANSON, JR.Age 27 Birthplace MD.  
(State)Groom's Residence 1909 E. JEFFERSON STREETMarital Status SINGLEBride's Name ALFRIEDA MARIA LIVINGSTONAge 25 Birthplace MD.  
(State)Bride's Residence 1909 E. JEFFERSON STREETMarital Status SINGLERelationship to groom if any NONE

REV. VERNON MC BRIDE

Name of Officiating Clergy or Authorized Officer

ASS'T. PASTOR

Title and Religious Denomination or Office

3206 PELHAM AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

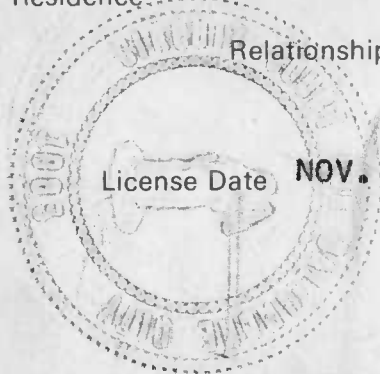
I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00



This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45157

## Certificate of Marriage

State of Maryland

LICENSE NO.

130671

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28TH. day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LARRY E CARMICHAEL**Age **24** Birthplace **MD.**  
(State)Groom's Residence **1024 N STOCKTON ST**

Marital Status

**SINGLE**Bride's Name **SYKEITHA D DAVIS**Age **21** Birthplace **MD.**  
(State)Bride's Residence **1024 N STOCKTON ST**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE****REV. JAMES WILKINS**

Name of Officiating Clergy or Authorized Officer

License Date **NOV 21 85****MINISTER**

Title and Religious Denomination or Office

**JW****2734 WINCHESTER STREET**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985**

License Fee \$

**25.00****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45158

LICENSE NO.  
130672

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 26TH. day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **MICHAEL WAYNE GATLING**

Age **29** Birthplace **N.C.**  
(State)

Groom's  
Residence **3111 ELBA DR. BALTO.CO.,MD**

Marital Status **SINGLE**

Bride's  
Name **LISA LAVERNE SKIPWITH**

Age **20** Birthplace **MD.**  
(State)

Bride's  
Residence **803 BONAPARTE AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**IVAN S. HAYE**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 21, 85**

**MINSTER ST. PAUL FREE WILL BAPTIST CHURCH**

Title and Religious Denomination or Office

**3109 THORNFIELD ROAD**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

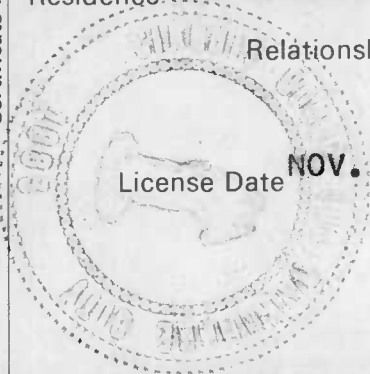
I hereby certify that the above is a true copy of a record filed in this

office on **SAUNDRA E. BANKS, CLERK** **DEC 3 1985**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45159

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130700

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

BOBBY SULLIVAN

Age 42 Birthplace MD.  
(State)Groom's  
Residence

2944 WINCHESTER ST

Marital Status SINGLEBride's  
Name

CLARICE A GREEN

Age 35 Birthplace MD.  
(State)Bride's  
Residence

2944 WINCHESTER ST

Marital Status SINGLE  
NONE

Relationship to groom if any

REV. E.E. WARREN, JR. D.D.

Name of Officiating Clergy or Authorized Officer

License Date NOV. 26 85

MINISTER ( BAPTIST )

Title and Religious Denomination or Office

3005 BAKER ST. #21216

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 3 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45160

LICENSE NO.

130714

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

GLEN KEITH BARTON

Age 25

Birthplace

MD.

(State)

Groom's

Residence

2902 FREEWAY. BALTO.CO.,MD

Marital Status SINGLE

Bride's

Name

DEBRA MARIE HARTMAN

Age 27

Birthplace

MD.

(State)

Bride's

Residence

2902 FREEWAY. BALTO.CO.,MD

Marital Status DIVORCED

Relationship to groom if any

NONE

GEORGE W. PFERDEORT

Name of Officiating Clergy or Authorized Officer

License Date NOV. 25

85

MINISTER (METHODIST)

Title and Religious Denomination or Office

6911 CHAMBERS ROAD #21234

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

tt

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45161

## Certificate of Marriage

State of Maryland

LICENSE NO.

130730

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH. day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **JEFFREY P. MCEVOY**Age **33** Birthplace **MD.**  
(State)Groom's  
Residence **806 WILLIAM ST.**Marital Status **DIVORCED**Bride's  
Name **MARGARET KIRBY MERRY**Age **29** Birthplace **W. VA.**  
(State)Bride's  
Residence **806 WILLIAM ST.**Marital Status **SINGLE**Relationship to groom if any **NONE****MALCOLM J. MATTHEWS**

Name of Officiating Clergy or Authorized Officer

**ASST. RECTOR, SAINT DAVID'S CHURCH**

Title and Religious Denomination or Office

**4700 ROLAND AVE. #21210**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985**

License Fee \$

**25<sup>00</sup>****SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45162

## Certificate of Marriage

State of Maryland

LICENSE NO.

130745

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH. day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

KEVIN JOSEPH HARRIS

Age 26

Birthplace

MD. (State)

Groom's  
Residence

721 HOLLEN ROAD

Marital Status

SINGLE

Bride's  
Name

LAURA ANN PETERS

Age 21

Birthplace

MD. (State)

Bride's  
Residence

6407 LEWIS RD. BALTO. CO., MD.

Marital Status

SINGLE

Relationship to groom if any

NONE

ROBERT T. WOODWORTH

Name of Officiating Clergy or Authorized Officer

License Date NOV. 29,

85

PASTOR, CHRIST &amp; COUNTRY CHURCH

Title and Religious Denomination or Office

6020 OLD HARFORD RD. #21214

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45163

## State of Maryland

LICENSE NO.

130773

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH. day of NOVEMBER 1985

BALTIMORE, MARYLAND

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOSEPH

D.

HYNSON

Age 59

Birthplace

MD.

(State)

Groom's  
Residence

3952

PENHURST

AVE.

Marital Status

WIDOWER

Bride's  
Name

DORA

M.

GASKINS

Age 47

Birthplace

N. CAR.

(State)

Bride's  
Residence

5028

CHALGROVE

AVE.

Marital Status

DIVORCED

Relationship to groom if any **NONE**

REV. NORRIS DICKERSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 27 85**

BAPTIST MINISTER

Title and Religious Denomination or Office

201 N. MONASTERY AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45164

## Certificate of Marriage

State of Maryland

LICENSE NO.

130785

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DENNIS W TRANELLO

Age 35

Birthplace

MD.

(State)

Groom's  
Residence

7922 KAVNAGH RD BALTO CO MD

Marital Status

DIVORCED

Bride's  
Name

MARY K BOWEN

Age 31

Birthplace

MD.

(State)

Bride's  
Residence

7922 KAVNAGH RD BALTO CO MD

Marital Status

DIVORCED

Relationship to groom if any

NONE

REV. RICHARD E. PARKS

Name of Officiating Clergy or Authorized Officer

License Date NOV 27 85

PASTOR, SACRED HEART OF MARY CHURCH

Title and Religious Denomination or Office

6736 YOUNGSTOWN AVE. #21222

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

SANDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45165

# Certificate of Marriage

State of Maryland

LICENSE NO.

130790

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 30TH. day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MARYLAND  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WILLIAM L SHANNAHAN 3RD

Age 25

Birthplace

MD.

(State)

Groom's  
Residence

3726 FRANKFORD AVE

Marital Status

DIVORCED

Bride's  
Name

SUSAN A ENGLISH

Age 28

Birthplace

MD.

(State)

Bride's  
Residence

3726 FRANKFORD AVE

Marital Status

DIVORCED

Relationship to groom if any

NONE

ROBERT T. WOODWORTH

Name of Officiating Clergy or Authorized Officer

License Date NOV. 29 85

PASTOR, CHRIST &amp; COUNTRY CHURCH

Title and Religious Denomination or Office

6020 OLD HARFORD ROAD #21214

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45166

## Certificate of Marriage

State of Maryland

LICENSE NO.

130817

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>ROBERT E. TAYLOR</b>	Age	<b>69</b>	Birthplace	<b>VA.</b>
				(State)	
Groom's Residence	<b>4310 BELAIR RD.</b>	Marital Status	<b>WIDOWER</b>		
Bride's Name	<b>MARIE L. CREIGHTON</b>	Age	<b>70</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>4310 BELAIR RD.</b>	Marital Status	<b>WIDOW</b>		

Relationship to groom if any **NONE****REV. AUSTIN F. SCHILDWACHTER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29,****85 RETIRED EPISCOPAL PRIEST**

Title and Religious Denomination or Office

**26 E. ALAN BROOKE CT. #21204**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45167

State of Maryland

LICENSE NO.

130453

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 29th day of NOVEMBER 1985  
BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD C RAMSAY JR**

Age **24** Birthplace **MD.**  
(State)

Groom's Residence **1153 CARROLL ST**

Marital Status **SINGLE**

Bride's Name **RENEICE JACOBS**

Age **26** Birthplace **MD.**  
(State)

Bride's Residence **1153 CARROLL ST**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

REV. STEVE B. BREWER

Name of Officiating Clergy or Authorized Officer

PASTOR, BAPTIST CHURCH

Title and Religious Denomination or Office

211 s. broadway , church off.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

DEC 02 1985

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45168

## State of Maryland

LICENSE NO.

130767

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>FLOYD A. COAKLEY, JR.</b>	Age	<b>21</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>532 S. LEHIGH ST.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>JUDY A. WATSON</b>	Age	<b>18</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>314 S. MACON ST.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

**SYLVESTER E. FEELEY**

Name of Officiating Clergy or Authorized Officer

**PRIEST- CATHOLIC**

Title and Religious Denomination or Office

**600 S. CONKLING ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45169

LICENSE NO.

130761

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **BENNY ALLEN HICKS, JR**Age **24** Birthplace **MD.**

(State)

Groom's

Residence **1725 LIGHT ST.**Marital Status **SINGLE**

Bride's

Name **BARBARA LEE PEDDICORD**Age **22** Birthplace **MD.**

(State)

Bride's

Residence **1725 LIGHT ST.**Marital Status **SINGLE**Relationship to groom if any **NONE****JAMES B. HUFFMAN**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 27 85****PASTOR- LUTHERAN CHURCH IN AMERICA**

Title and Religious Denomination or Office

**214 E. RANDAKK ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45170

## Certificate of Marriage

State of Maryland

LICENSE NO.

130746

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CLYCE V. JEFFERS

Age 51

Birthplace N.C.  
(State)Groom's  
Residence

2828 E. FEDERAL STREET

Marital Status WIDOWER

Bride's  
Name

DORIS L. GREENE

Age 38

Birthplace N. C.  
(State)Bride's  
Residence

3625 SPRINGDALE AVENUE

Marital Status DIVORCED

Relationship to groom if any

NONE

WILLIAM S. BARNES

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. PAUL APOSTOLIC CHURCH

Title and Religious Denomination or Office

1537 N. BROADWAY

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45171

## Certificate of Marriage

State of Maryland

LICENSE NO.

130690

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS K. HYDER** Age **19** Birthplace **MD.**  
(State)

Groom's Residence **1415 HADWICK DR. APT. A BALTO. CO., MD.** Marital Status **SINGLE**

Bride's Name **SUSAN M. BICKEL** Age **18** Birthplace **MD.**  
(State)

Bride's Residence **6219 FORTVIEW WAY** Marital Status **SINGLE**

Relationship to groom if any **NONE**

W. E. SHIFLETT

Name of Officiating Clergy or Authorized Officer

PASTOR- FREEDOM BAPTIST CHURCH

Title and Religious Denomination or Office

2606 W. WOODWELL RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45172

LICENSE NO.

130683

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>FRANK L. MC COY</b>	Age	<b>28</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>7904 DUNHILL VILLAGE CIRCLE</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>ANNIE M. ALLEN</b>	Age	<b>32</b>	Birthplace	<b>S.C.</b> (State)
Bride's Residence	<b>7904 DUNHILL VILLAGE CIRCLE</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

**ERNEST FLOWERS**

Name of Officiating Clergy or Authorized Officer

**PASTOR- OPEN BIBLE BAPT. CHURCH**

Title and Religious Denomination or Office

**5718 BOWLEYS LANE**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **NOV. 26**

**85**

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45173

## State of Maryland

LICENSE NO.

130574

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WALTER R. CLARK**

Age **33** Birthplace **MD.**  
(State)

Groom's Residence **1731 N. BRADFORD STREET**

Marital Status **DIVORCED**

Bride's Name **SHELIA D. SNOWDEN**

Age **32** Birthplace **VA.**  
(State)

Bride's Residence **4402 CHALET COURT**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**REV. RICHARD E. TABRON**

Name of Officiating Clergy or Authorized Officer

**MINISTER ZION BAPTIST CHURCH**

Title and Religious Denomination or Office

**1353 WINSTON AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 02 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **NOV. 21**

**85**

License Fee \$

**35.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45174

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130508

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name GEORGE M ERAT Age 28 Birthplace MD.  
(State)

Groom's Residence 4205 POTTER ST Marital Status SINGLE

Bride's Name SUSAN M. MANDATO Age 30 Birthplace MD.  
(State)

Bride's Residence 746 WEST HILL PKWY BALTO CO MD Marital Status DIVORCED

Relationship to groom if any NONE

License Date NOV. 14 85

REV. DAVID V. KOCH

Name of Officiating Clergy or Authorized Officer

PASTOR, LUTHERAN CHURCH

Title and Religious Denomination or Office

HAMMONDS LA &amp; ROBINWOOD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 02 1985  
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45175

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130724

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL ANTHONY MANNING**Age **25** Birthplace **MD.**  
(State)Groom's Residence **706 S. ROSE ST.**Marital Status **SINGLE**Bride's Name **JOANNE MARY SCHLUNDT**Age **19** Birthplace **MD.**  
(State)Bride's Residence **621 S. BRADFORD ST.**Marital Status **SINGLE**Relationship to groom if any **NONE****MSGR CHESTER J. MIECZKOWSKI**

Name of Officiating Clergy or Authorized Officer

**PASTOR OF HOLY ROSARY**

Title and Religious Denomination or Office

**408 S. CHESTER STREET**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 6 1985**

License Fee \$

**25****SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

2

## Certificate of Marriage

85-45176

State of Maryland

LICENSE NO.

130691

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER, 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DAVID PAUL SANTONI

Age 21 Birthplace MD.  
(State)Groom's  
Residence215 KENSINGTON PKWY. HARFORD CO., MD.Marital Status SINGLEBride's  
Name

COLEEN MARIE KNELL

Age 19 Birthplace MD.  
(State)

Bride's

Residence 710 FERGUSON ROADMarital Status SINGLERelationship to groom if any NONEMSGR. CHESTER J. MIECZKOWSKI

Name of Officiating Clergy or Authorized Officer

License Date NOV. 25 85PASTOR OF HOLY ROSARY

Title and Religious Denomination or Office

TT

408 s. chester st.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45177

LICENSE NO.

130584

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30th day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID LEE WASHINGTON**

Age **30** Birthplace **S.C.**  
(State)

Groom's Residence **2841 W. COLDSRING LANE**

Marital Status **SINGLE**

Bride's Name **REBECCA P. MITCHELL**

Age **21** Birthplace **MD.**  
(State)

Bride's Residence **2841 W. COLDSRING LANE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**REBECCA TARPLEY**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 19**

**85**

**EVANGELIST (BAPTIST)**

Title and Religious Denomination or Office

**1807 N. LONGWOOD STREET**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on **DEC 6 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45178

## Certificate of Marriage

State of Maryland

LICENSE NO.

129562

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **MICHAEL ANGELO CAHN**Age **27** Birthplace **MD.**  
(State)Groom's  
Residence **1301 WOODINGTON RD. 21229**Marital Status **SINGLE**Bride's  
Name **MICHELE RENEE DOUGLAS**Age **22** Birthplace **MD.**  
(State)Bride's  
Residence **1301 WOODINGTON RD. 21229**Marital Status **SINGLE**Relationship to groom if any **NONE**REV. ERA S. FERRELL

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 30** **85**ASSOCIATE MIN. OF EMMANUELS C.C. CHURCH  
Title and Religious Denomination or Office1530 W. LEXINGTON ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 02 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45179

# Certificate of Marriage

State of Maryland

LICENSE NO.

129517

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24<sup>th</sup> day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDWARD L. BUFFINGTON, JR.**

Age **30**

Birthplace **MD.**  
(State)

Groom's Residence **1315 W. 37TH ST.**

Marital Status **DIVORCED**

Bride's Name **DEBORAH F. PERLMAN**

Age **23**

Birthplace **MD.**  
(State)

Bride's Residence **1325 ROLAND HIEGHTS**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**DAVID E. CROSSLEY**

Nome of Officiating Clergyman or Authorized Officer

License Date **SEPT. 19 85**

**RECTOR, SAINT DAVID'S CHURCH**

Title and Religious Denomination or Office

**4700 ROLAND AV. BALTIMORE, MD. 21210**

Address of Clergyman or Authorized Officer

tt

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 0 2 1985**

License Fee - Resident \$  
Non-Resident \$

**SAUNDRA E. BANKS, CLERK**  
Signature-Clerk of the Court



2

85-45180

## Certificate of Marriage

State of Maryland

LICENSE NO.

130669

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>LUIS A. LATORRE</b>	Age	<b>28</b>	Birthplace	<b>N.Y.</b>
				(State)	
Groom's Residence	<b>1810 RAMBLING RIDGE LA.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>JANICE E. MARSHALL</b>	Age	<b>23</b>	Birthplace	<b>N.Y.</b>
				(State)	
Bride's Residence	<b>1810 RAMBLING RIDGE LA.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE****RECEIVED**

DEC 2 1985  
 License Date **NOV 21 85**  
 CIRCUIT COURT  
 FOR BALTIMORE CITY

**WAYNE COCKRELL**

Name of Officiating Clergy or Authorized Officer

**PASTOR- MANNA BIBLE BAPT. CHURCH**

Title and Religious Denomination or Office

**4521 FINNEY AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985**

License Fee \$

**25.00****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45181

## Certificate of Marriage

State of Maryland

LICENSE NO.

130596

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name LLOYD H. FOSTER Age 40 Birthplace JAMAICA  
(State)  
Groom's Residence 4012 PENHURST AVE. Marital Status DIVORCED  
Bride's Name YVONNE BROOKS Age 28 Birthplace MD.  
(State)  
Bride's Residence 4012 PENHURST AVE. Marital Status SINGLE  
Relationship to groom if any NONE

License Date NOV. 19 85DAVID EDWARD GAINES

Name of Officiating Clergy or Authorized Officer

PASTOR- MANNA BIBLE BAPT. CHURCH

Title and Religious Denomination or Office

3043 W. BELVEDERE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 2 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 28.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45182

LICENSE NO.  
130538

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23<sup>rd</sup> day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES F. CARTER**

Age **50** Birthplace **MD.**  
(State)

Groom's Residence **8720 RAVENVIEW AVENUE**

Marital Status **DIVORCED**

Bride's Name **JANICE L. MOORE**

Age **44** Birthplace **MD.**  
(State)

Bride's Residence **8720 RAVENVIEW AVENUE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**RECEIVED**

License Date **NOV. 14, 85**  
**DEC 2 1985**

**CIRCUIT COURT  
FOR BALTIMORE CITY**

**CLIFFORD P. LLOYD**

Name of Officiating Clergy or Authorized Officer

**MINISTER-UNITED METH. CHURCH**

Title and Religious Denomination or Office

**5315 HARFORD RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45183

## Certificate of Marriage

State of Maryland

LICENSE NO.

130311

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT E. CLARK** Age **34** Birthplace **MD.**  
(State)

Groom's Residence **753 FULBROOK RD., BALTIMORE CO., MD.** Marital Status **DIVORCED**

Bride's Name **SHIRLEY KAY WEIS** Age **37** Birthplace **MD.**  
(State)

Bride's Residence **753 FULBROOK RD., BALTIMORE CO., MD.** Marital Status **DIVORCED**

Relationship to groom if any **NONE**

License Date **NOV. 19,****85****EUGENE P. BARTELL**

Name of Officiating Clergy or Authorized Officer

**MINISTER- UNITED CHURCH OF CHRIST**

Title and Religious Denomination or Office

**1728 EASTERN AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45184

## Certificate of Marriage

State of Maryland

LICENSE NO.

130285

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY FOLKES**Age **19** Birthplace **MD.**  
(State)Groom's Residence **5485 MOORES RUN DR.**Marital Status **SINGLE**Bride's Name **ROCHELLE DENISE WEBB**Age **19** Birthplace **MD.**  
(State)Bride's Residence **5485 MOORES RUN DR.**Marital Status **SINGLE**Relationship to groom if any **NONE****RUFUS CARTER**

Name of Officiating Clergy or Authorized Officer

**PASTOR- PHILADELPHIA BAPT. CHURCH**

Title and Religious Denomination or Office

**826 N. KENWOOD AVE.**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 2 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45185

## Certificate of Marriage

State of Maryland

LICENSE NO.

130300

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>ROBERT E. LARKINS</b>	Age	<b>58</b>	Birthplace	<b>MD.</b>
Groom's Residence	<b>4212 ELDERON AVE.</b>	Marital Status	<b>WIDOWER</b>		
Bride's Name	<b>JUANITA Y. HOLLOWAY</b>	Age	<b>49</b>	Birthplace	<b>N.Y.</b>
Bride's Residence	<b>1206 E. 368TH ST.</b>	Marital Status	<b>WIDOW</b>		
Relationship to groom if any	<b>NONE</b>				

**CHARLES M. FRANKLIN, SR.**

Name of Officiating Clergy or Authorized Officer

**MINISTER- ROAY OF HOPE BAPT. CHURCH**

Title and Religious Denomination or Office

**3401 THE ALAMEDA**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy, to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45186

## Certificate of Marriage

State of Maryland

LICENSE NO.

129569

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23<sup>rd</sup> day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WINFORD WATLINGTON**Age **45** Birthplace **N. CAROLINA**  
(State)Groom's Residence **2639 EDMONDSON AVENUE**Marital Status **DIVORCED**Bride's Name **PEGGY A. MORTON**Age **38** Birthplace **MARYLAND**  
(State)Bride's Residence **1901 WHEELER AVENUE**Marital Status **DIVORCED**Relationship to groom if any **NONE****ELMER Y. SEMBLY, JR.**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT. 20, 85****MINISTER- CENTRAL CHURCH OF CHRIST**

Title and Religious Denomination or Office

**4712 NORFOLK AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45187

## Certificate of Marriage

State of Maryland

LICENSE NO.

130166

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23<sup>rd</sup> day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARK G. BUEDEL** Age **25** Birthplace **MD.**  
(State)

Groom's Residence **801 CEDARCROFT RD.** Marital Status **SINGLE**

Bride's Name **KELLY B. O'CONOR** Age **23** Birthplace **MD.**  
(State)

Bride's Residence **7530 BELLONA AVE. BALTO.CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

E. M. TAYLOR

Name of Officiating Clergy or Authorized Officer

PRIEST- CATHOLIC

Title and Religious Denomination or Office

1701 REGENT RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **OCT. 23 85**License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

85-45188

## Certificate of Marriage

State of Maryland

LICENSE NO.

130677

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARC M. WINNER**Age **43** Birthplace **MD.**  
(State)Groom's Residence **111 HAMLET HILL ROAD**Marital Status **DIVORCED**Bride's Name **PHYLLIS A. GIMBEL**Age **41** Birthplace **MD.**  
(State)Bride's Residence **111 HAMLET HILL ROAD**Marital Status **SINGLE**Relationship to groom if any **NONE****MELVIN LUTERMAN**

Name of Officiating Clergy or Authorized Officer

License Date **NOV 26 85**Title and Religious Denomination or Office  
**7310 PARK HEIGHTS AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **SAUNDRA E. BANKS, CLERK**

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45189

## Certificate of Marriage

State of Maryland

LICENSE NO.

130490

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 15th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ADDULLAH AL- JABBAR HAKIMAge 35 Birthplace VA.  
(State)Groom's Residence 913 PENNSYLVANIA AVENUEMarital Status SINGLEBride's Name ELAINE LYNETTE QUICKLEYAge 32 Birthplace MD.  
(State)Bride's Residence 913 PENNSYLVANIA AVENUEMarital Status SINGLERelationship to groom if any NONEHAJ MAHDI NUR EL-HAGE

Name of Officiating Clergy or Authorized Officer

License Date NOV 12 85IMAM

Title and Religious Denomination or Office

1409 MADISON AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on DEC 23 1985SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45190

## Certificate of Marriage

State of Maryland

LICENSE NO.

130711

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 1st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CARL ALBERT ANDERSON, SR

Age 40 Birthplace PA.  
(State)Groom's  
Residence

3-ARMITAGE CT. BALTO.CO., MD

Marital Status DIVORCEDBride's  
Name

SHARON HELENE TANNENBAUM

Age 27 Birthplace MD.  
(State)

Bride's

Residence

3-ARMITAGE CT. BALTO.CO., MD

Marital Status SINGLERelationship to groom if any NONEMAURICE T. BLACKWELL

Name of Officiating Clergy or Authorized Officer

License Date NOV. 25 85PASTOR- ST. EDWARD R.C. CHURCH

Title and Religious Denomination or Office

901 POPLAR GROVE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 20 1985SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45191

## Certificate of Marriage

State of Maryland

LICENSE NO.  
129744

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7<sup>th</sup> day of Dec. 1985

the following persons were by me united in marriage at

Baltimore Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

FRIDAY M EFEYINI

Age 25

Birthplace

NIGERIA

(State)

Groom's  
Residence

3 SOLAR CIRCLE BALTO CO MD

Marital Status

SINGLE

Bride's  
Name

MARTINA M RICHARDSON

Age 21

Birthplace

MD.

(State)

Bride's  
Residence

2806 ROSLYN AVE

Marital Status

SINGLE

NONE

Relationship to groom if any

License Date OCT. 1

85

TT

Name of Officiating Clergy or Authorized Officer

Catholic Priest

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-16-85

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45192

LICENSE NO.

131225

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**GARY VAN DENNIS**

Age 28 Birthplace MD.  
(State)

Groom's  
Residence

**5320 BOSWORTH AVENUE**

Marital Status **SINGLE**

Bride's  
Name

**JUDY STRINGFIELD**

Age 26 Birthplace N.C.  
(State)

Bride's  
Residence

**5320 BOSWORTH AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

REV. FRANK E. DRUMWRIGHT, JR.

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 26,**

**85**

ASST-PASTOR HERITAGE UNITED CHURCH OF CHRIST

Title and Religious Denomination or Office

3106 LIBERTY HEIGHTS AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45193

## Certificate of Marriage

State of Maryland

LICENSE NO.

131250

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>GREGORY M. BAILEY, JR.</b>	Age	<b>19</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>3445 FLANNERY LA. BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>RHONDA M. HALE</b>	Age	<b>17</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>3200 ESSEX RD. BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE****JAMES S. WILLIAMS**

Name of Officiating Clergy or Authorized Officer

**PASTOR NE# UNITY BAPTIST CHURCH**

Title and Religious Denomination or Office

**1905 E. 20th ST**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 31 1985**  
**SANDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45194

## Certificate of Marriage

State of Maryland

LICENSE NO.

131255

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOSEPH THOMAS THIESS, JR.**Age **42** Birthplace **MD.**  
(State)Groom's Residence **223 S. EAST AVENUE**Marital Status **DIVORCED**Bride's Name **JOYCE ANN SIMMONT**Age **34** Birthplace **W. VA.**  
(State)Bride's Residence **223 S. EAST AVENUE**Marital Status **DIVORCED**Relationship to groom if any **NONE**

REV. GLEN E. RODGERS

Name of Officiating Clergy or Authorized Officer

License Date **DEC.26****85**

MINISTER UNITED CHURCH OF CHRIST

Title and Religious Denomination or Office

6865 PARSONS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 31 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD, 21201; upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45195

## Certificate of Marriage

State of Maryland

LICENSE NO.

131260

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 26th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **SYLVESTER JAMES JOHNSON**Age **58** Birthplace **MD.**  
(State)

Groom's

Residence **2507 N. EDGECOMB CIR.**Marital Status **DIVORCED**

Bride's

Name **MARION L. LOGAN**Age **35** Birthplace **MD.**  
(State)

Bride's

Residence **2507 N. EDGECOMB CIR.**Marital Status **DIVORCED**Relationship to groom if any **NONE****REV. JAMES WILKINS**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 26 85****MISSIONARY BAPTIST PASTOR**

Title and Religious Denomination or Office

**2734 WINCHESTER ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SANDRA E. BANKS, CLERK**  
**DEC 31 1985**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45196

## Certificate of Marriage

State of Maryland

LICENSE NO.

131266

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **CHARLES E. JACKSON, 3RD**Age **21** Birthplace **MD.**  
(State)Groom's  
Residence **4506 WALTHER AV.**Marital Status **SINGLE**Bride's  
Name **CONSTANCE SLEIGH**Age **41** Birthplace **N.Y.**  
(State)Bride's  
Residence **4506 WALTHER AV.**Marital Status **SINGLE**Relationship to groom if any **NONE**REV. RUSSELL GENE HOGAN

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 27** **85**ASSOCIATE-NEW LEBANON CALVARY BAPTIST

Title and Religious Denomination or Office

501 N. MILTON AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

**DEC 31 1985**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45197

## Certificate of Marriage

State of Maryland

LICENSE NO.

130189

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14 day of Dec 1985

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WALTER K PATTERSON

Age 25

Birthplace

MD.

(State)

Groom's  
Residence

4808 OLD YORK RD

Marital Status

SINGLE

Bride's  
Name

LYNN M WILLIAMS

Age 24

Birthplace

MD.

(State)

Bride's  
Residence

4808 OLD YORK RD

Marital Status

SINGLE

NONE

Relationship to groom if any

License Date OCT. 23,

85

Charles Franklin

Name of Officiating Clergy or Authorized Officer

Baptist Minister

Title and Religious Denomination or Office

3401 The Alameda

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-16-85  
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45198

## Certificate of Marriage

State of Maryland

LICENSE NO.

130137

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14 day of Dec 1985

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN T. BELT, SR**Age **44**Birthplace **MD.**  
(State)Groom's Residence **6708 LONGHILL RD. BALTO.CO., MD**Marital Status **DIVORCED**Bride's Name **MARY H. JENKINS**Age **35**Birthplace **S.C.**  
(State)Bride's Residence **1404 E. BIDDLE ST. 21213**Marital Status **DIVORCED**Relationship to groom if any **NONE**P. A. Kearney

Name of Officiating Clergy or Authorized Officer

Minister

Title and Religious Denomination or Office

611 W. Asquith ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-16-85**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00License Date **OCT. 21****85**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45199

## State of Maryland

LICENSE NO.

130842

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 14th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GEORGE S. CURTIS**

Age 48 Birthplace **MD.**  
(State)

Groom's Residence **513 CAMPBELL LANE**

Marital Status **DIVORCED**

Bride's Name **ELLEN R. TOWNSEND**

Age 43 Birthplace **VA.**  
(State)

Bride's Residence **513 CAMPBELL LANE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**HOWARD R. QUEEN**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6 85**

**PASTOR- PLEASANT HOPE BAPTIST CHURCH**

Title and Religious Denomination or Office

**3719 NORTONIA RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 17 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45200

State of Maryland

LICENSE NO.

130306

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	THOMAS WILLIAM CAHILL	Age	29	Birthplace	MD.
					(State)
Groom's Residence	3127-J WHEATON WAY. HOWARD CO., MD	Marital Status	SINGLE		
Bride's Name	MYRA JEAN LUKE	Age	31	Birthplace	VA.
					(State)
Bride's Residence	3127-J WHEATON WAY. HOWARD CO., MD	Marital Status	SINGLE		

Relationship to groom if any **NONE**

ROBERT L. READ

Name of Officiating Clergy or Authorized Officer

PASTOR- HUNTING RIDGE PRESBYTERIAN

Title and Religious Denomination or Office

EDMONDSON AVE. &amp; WINANS WAY

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 17 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date **OCT. 31** **85**

TT

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45201

## Certificate of Marriage

State of Maryland

LICENSE NO.

130663

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	TYREE GREGORY	Age	31	Birthplace	MARYLAND
				(State)	
Groom's Residence	6410 LIBERTY RD. BALTO. CO. MD.	Marital Status	SINGLE		
Bride's Name	YVONNE E MC ELVEEN	Age	34	Birthplace	MARYLAND
				(State)	
Bride's Residence	6410 LIBERTY RD. BALTO. CO. MD.	Marital Status	DIVORCED		
Relationship to groom if any	NONE				

MARCUS G. WOOD

Name of Officiating Clergy or Authorized Officer

85 PASTOR- PROVIDENCE BAPT. CHURCH

Title and Religious Denomination or Office

1401 PENNSYLVANIA AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 17 1985

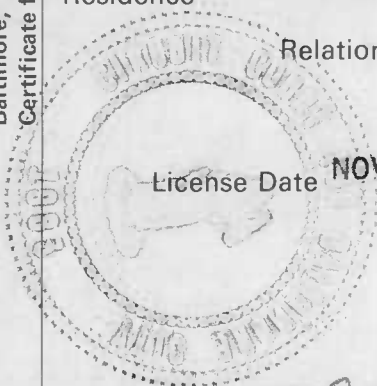
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45202

State of Maryland

LICENSE NO.  
51760

Copy for State Department of Health and Mental Hygiene  
BALTIMORE CITY (30)

*I Hereby Certify* that on the 14<sup>th</sup> day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES M LANIER**  
Groom's Residence **2702 CHELSEA TERR**

Age **27** Birthplace **N.J.**  
(State) **SINGLE**

Bride's Name **SUSAN A WHITE**  
Bride's Residence **2702 CHELSEA TERR**

Age **32** Birthplace **MD.**  
(State) **DIVORCED**

Relationship to groom if any

Marital Status **NONE**

**MONROE R. SAUNDERS**

License Date **DEC 13**

**DUP LIC 131050**

Name of Officiating Clergyman or Authorized Officer  
**85 BISHOP- 1st UNITED CHURCH OF JESUS CHRIST**

Title and Religious Denomination or Office  
**3002 N. HILTON ST.**

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 17 1985**

License Fee - Resident \$  
Non-Resident \$

Signature-Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 301 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45203

State of Maryland

LICENSE NO.

130245

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **HERMAN PAUL WHITE**

Age **39** Birthplace **S.C.**  
(State)

Groom's  
Residence **4906 CORDELIA AVENUE**

Marital Status **SINGLE**

Bride's  
Name **JOHNNIE MAE BAILEY**

Age **44** Birthplace **S.C.**  
(State)

Bride's  
Residence **4906 CORDELIA AVENUE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**GEORGE V. WILSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 25 85**

**PASTOR- UNITED HOLY CHURCH**

Title and Religious Denomination or Office

**9 S. ROSEDALE ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 17 1985**

License Fee \$ **25.00**

**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

State of Maryland

85-45204

LICENSE NO.

129627

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31<sup>st</sup> day of December 19 85the following persons were by me united in marriage at Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES E. HILTON-BEY**Age **30** Birthplace **MD.**  
(State)Groom's Residence **1100 BOLTON STREET**Marital Status **SINGLE**Bride's Name **GINA GRIFFIN**Age **28** Birthplace **MD.**  
(State)Bride's Residence **1100 BOLTON STREET**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **SEPT. 23 85**

tt

Rev. Vernon M. Dobson

Name of Officiating Clergy or Authorized Officer

Baptist Church

Title and Religious Denomination or Office

3401 Calverton Rd.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45205

## Certificate of Marriage

State of Maryland

LICENSE NO.  
127843

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16<sup>th</sup> day of December 19 85the following persons were by me united in marriage at Baltimore, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **BARRY A. JONES**Age **26** Birthplace **MD.**  
(State)Groom's  
Residence **3703 HARLEM AVENUE**Marital Status **SINGLE**Bride's  
Name **DEBORAH A. JOHNSON**Age **31** Birthplace **WASH., D.C.**  
(State)Bride's  
Residence **1047 W. FAYETTE STREET**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **JULY 16 85**

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination of Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 18 1985**

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45206

## Certificate of Marriage

State of Maryland

LICENSE NO.

51757

Copy for State Department of Health and Mental Hygiene  
BALTIMORE CITY (30)I Hereby Certify that on the 14<sup>th</sup> day of December 19 85the following persons were by me united in marriage at Baltimore, Md.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MARLAND LOGAN

Age 42 Birthplace VA

(State)

Groom's  
Residence

2426 MC CULLOH ST

Marital Status

DIVORCED

Bride's  
Name

DIANA M SIMMS

Age 30 Birthplace MD.

(State)

Bride's  
Residence

719 W SARATOGA ST

Marital Status

SINGLE

Relationship to groom if any NONELicense Date DEC 9

85

DUP LIC 128429 LIC EXPIRES 2/5/86

Name of Officiating Clergyman or Authorized Officer

Rev. Morris O. Johnson

Title and Religious Denomination or Office

Baptist ordained minister

Address of Clergyman or Authorized Officer

1610 Presbury St

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 18 1985License Fee - Resident \$  
Non-Resident \$

Signature-Clerk of the Court

Carl T. Chester

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 301 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45207

# Certificate of Marriage

State of Maryland

LICENSE NO.

130545

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 14th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RANDOLPH J BAILEY JR**

Age **35** Birthplace **MD.**  
(State)

Groom's Residence **3501 FAIRVIEW AVE**

Marital Status **SINGLE**

Bride's Name **DEBORAH FREEMAN**

Age **30** Birthplace **MD.**  
(State)

Bride's Residence **3501 FAIRVIEW AVE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**CHARLES C. MIDDLETON**

Name of Officiating Clergy or Authorized Officer

**ASSOCIATE MINISTER- CONCORD BAPT. CHURCH**

Title and Religious Denomination or Office

**5204 LIBERTY HEIGHTS AVENUE**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

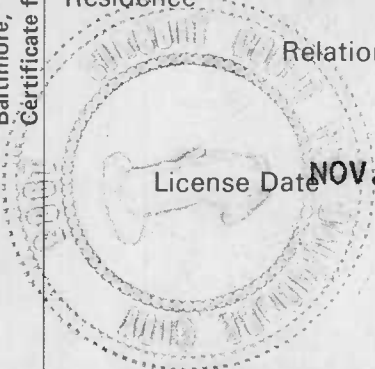
office on

**SAUNDRA E. BANKS, CLERK**

License Fee \$ 55.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45208

## Certificate of Marriage

State of Maryland

LICENSE NO.

130971

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 15th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

VICTOR L BUTTS JR

Age 27 Birthplace MD.  
(State)Groom's  
Residence

2705 KEYWORTH AVE

Marital Status

SINGLEBride's  
Name

ANNTONETTA COHEN

Age 26 Birthplace MD  
(State)Bride's  
Residence

2705 KEYWORTH AVE

Marital Status

SINGLERelationship to groom if any NONEJULIA M. WILLIAMS

Name of Officiating Clergy or Authorized Officer

PASTOR- APOSTOLIC HOLINESS

Title and Religious Denomination or Office

P.O. BOX 1705 DOVER, DELAWARE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45209

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130910

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)***I Hereby Certify* that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name WILLIAM S. MILLERAge 33 Birthplace MD.  
(State)Groom's  
Residence 620 BENNINGHAUS ROADMarital Status SINGLEBride's  
Name MARY ANN VERMILLERAAge 20 Birthplace MD.  
(State)Bride's  
Residence 620 BENNINGHAUS ROADMarital Status SINGLERelationship to groom if any NONETHOMAS E. GRAHAM

Name of Officiating Clergy or Authorized Officer

85 PASTOR- PRESBYTERIAN CHURCH IN AMERICA

Title and Religious Denomination or Office

3003 OAKCREST AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 18 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45210

## Certificate of Marriage

State of Maryland

LICENSE NO.

130918

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DEWEY E. GARDNER, SR. Age 40 Birthplace TENN.  
(State)Groom's Residence 3633 DOUBLE ROCK CT. BALTO.CO., MD. Marital Status DIVORCEDBride's Name REBECCA J. CARVER Age 28 Birthplace MD.  
(State)Bride's Residence 4411 MARY AVE. Marital Status DIVORCEDRelationship to groom if any NONECLIFFORD P. LLOYD

Name of Officiating Clergy or Authorized Officer

PASTOR- ST. JOHN'S OF HAMILTON U M CHURCH

Title and Religious Denomination or Office

3017 GIBBONS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 18 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45211

## State of Maryland

LICENSE NO.

130945

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 14th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

BERNARD L. HAYES

Age 40

Birthplace

N Y

(State)

Groom's Residence

65 SATURN CT BALTO CO MD

Marital Status

DIVORCED

Bride's Name

SHEILA C DUNGEE

Age 36

Birthplace

MD.

(State)

Bride's Residence

863 BRADHURST RD

Marital Status

DIVORCED

Relationship to groom if any

NONE

MARSHALL E. THOMAS

Name of Officiating Clergy or Authorized Officer

License Date DEC 10 85

ELDER- JEHOVAH'S WITNESSES

Title and Religious Denomination or Office

JW

605 ST. DUNSTANS RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 18 1985

License Fee \$ 25.00

**SANDRA E. BANKS, CLERK**  
Signature Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45212

## Certificate of Marriage

State of Maryland

LICENSE NO.

130968

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CHARLES A METHENY

Age

36

Birthplace

MD.

(State)

Groom's  
Residence

4321 HAMILTON AVE

Marital Status

DIVORCED

Bride's  
Name

TERESA L TESTERMAN

Age

21

Birthplace

WASH DC

(State)

Bride's  
Residence

4321 HAMILTON AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

W. EARL TAYLOR

Name of Officiating Clergy or Authorized Officer

PASTOR- BAPTIST

Title and Religious Denomination or Office

2937 MANCHESTER BAPTIST CHURCH

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 18 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45213

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130972

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>FRANCIS E. TILLMAN</b>	Age	<b>35</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>129 N. PATTERSON PARK AVE.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>ROSEMARIE RIHTARIC</b>	Age	<b>30</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>306 BENFIELD RD. A.A. CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

DONALD E. BENDEWALD

Name of Officiating Clergy or Authorized Officer

PASTOR- BETHLEHEM LUTHERAN CHURCH

Title and Religious Denomination or Office

4815 HAMILTON AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on DEC 18 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

2

85-45214

## Certificate of Marriage

State of Maryland

LICENSE NO.

130987

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14<sup>th</sup> day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MAURICE R. MARSHALL**Age **19** Birthplace **MD.**  
(State)Groom's Residence **1911 N HERBERT ST**Marital Status **SINGLE**Bride's Name **STEPHANIE P ASKEW**Age **19** Birthplace **MD.**  
(State)Bride's Residence **1903 FOREST PK AVE**Marital Status **SINGLE**Relationship to groom if any **NONE****GILBERT A. SCRIBNER**

Name of Officiating Clergy or Authorized Officer

**ELDER- JEHOVAH'S WITNESSES**

Title and Religious Denomination or Office

**708 RESERVOIR STREET**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 18 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45215

## Certificate of Marriage

State of Maryland

LICENSE NO.

130835

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14<sup>th</sup> day of December 19 85

the following persons were by me united in marriage at

Baltimore, md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GREGORY CLARKE RUFENACHT** Age **28** Birthplace **MD.**  
(State)Groom's Residence **2101 HACKNEY RD. HARFORD CO., MD.** Marital Status **SINGLE**Bride's Name **LEANNE FRANCES VOGT** Age **22** Birthplace **TX.**  
(State)Bride's Residence **9812 FOXHILL RD. BALTO. CO., MD.** Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 29** **85**

Name of Officiating Clergy or Authorized Officer

Wayne I. Harting  
Pastor, First Church of God of Baltimore  
Title and Religious Denomination or Office4901 Sipple Ave. Baltimore, md 21206  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 18 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.80

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45216

## Certificate of Marriage

State of Maryland

LICENSE NO.

130455

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 15<sup>th</sup> day of December 19 85the following persons were by me united in marriage at Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD WAYNE WICH**Age **37**Birthplace **PANAMA**  
(State)Groom's Residence **11 HIGH BUTTON CT. BALTO.CO., MD.**Marital Status **DIVORCED**Bride's Name **TERRE L. NAVARRIA**Age **30**Birthplace **MARYLAND**  
(State)Bride's Residence **4412 ASHCREST AVENUE**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **NOV. 8,****85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45217

## Certificate of Marriage

State of Maryland

LICENSE NO.

130187

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14<sup>th</sup> day of December 1985

the following persons were by me united in marriage at

Baltimore, md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANDRE CAMPBELL**Age **36** Birthplace **MD.**  
(State)Groom's Residence **914 N PORT ST**Marital Status **DIVORCED**Bride's Name **PATRICIA A GARLAND**Age **32** Birthplace **MD.**  
(State)Bride's Residence **914 N PORT ST**Marital Status **DIVORCED**

Relationship to groom if any

**NONE**License Date **OCT. 21 85**

Name of Officiating Clergy or Authorized Officer

Elder Frank E. Badrock.

Title and Religious Denomination or Office

Emmanuel Free Will Baptist Ch.

Address of Clergy or Authorized Officer

2830 Oakford Ave.

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 18 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45218

## State of Maryland

LICENSE NO.

131073

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17<sup>th</sup> day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOHN L. COAD, JR.

Age

29 Birthplace

MD.

(State)

Groom's  
Residence

2011 SINCLAIR LANE

Marital Status

SINGLE

Bride's  
Name

AUDREY D. DUNCAN

Age

33 Birthplace

MD.

(State)

Bride's  
Residence

1308 E. LAFAYETTE AVENUE

Marital Status

DIVORCED

Relationship to groom if any

NONE

JAMES S. WILLIAMS

Name of Officiating Clergy or Authorized Officer

License Date DEC. 17

85

PASTOR- NEW UNITY BAPTIST CHURCH

Title and Religious Denomination or Office

1905 E. 20th ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 19 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45219

# Certificate of Marriage

State of Maryland

LICENSE NO.  
130952

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 14th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DOUGLAS MCNEIL, JR Age 23 Birthplace MD.  
(State)  
Groom's Residence 3620 ANNE HATHAWAY DR. BALTO.CO.,MD Marital Status SINGLE  
Bride's Name HELEN ONEITA HENRYHAND Age 26 Birthplace S.C.  
(State)  
Bride's Residence 3620 ANNE HATHAWAY DR. BALTO.CO.,MD Marital Status SINGLE  
Relationship to groom if any NONE

License Date DEC 9 85

JW

E. A. WILSON

Name of Officiating Clergy or Authorized Officer

PASTOR- MT. ZION APOSTOLIC FAITH CHURCH

Title and Religious Denomination or Office

5501 LIBERTY HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 19 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45220

## Certificate of Marriage

State of Maryland

LICENSE NO.

130929

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 15th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>PERNELL C. BROOKS</b>	Age	<b>36</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>3310 W. BELVEDERE AVE. 9</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>ROXANNE E. SNEAD</b>	Age	<b>33</b>	Birthplace	<b>PA.</b>
				(State)	
Bride's Residence	<b>3310 W. BELVEDERE AVE.</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **DEC. 12 85**DOUGLAS I. MILES

Name of Officiating Clergy or Authorized Officer

PASTOR- BROWN'S MEMORIAL BAPTIST

Title and Religious Denomination or Office

3215 W. BELEDERE AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 19 1985License Fee \$ 25.50**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45221

LICENSE NO.

130908

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 15th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

HAROLD I LEVIN

Age 50 Birthplace MD.  
(State)

Groom's  
Residence

3730 GREENMOUNT AVE

Marital Status DIVORCED

Bride's  
Name

MARY T HUGHES

Age 31 Birthplace MD.  
(State)

Bride's  
Residence

3730 GREENMOUNT AVE

Marital Status DIVORCED

Relationship to groom if any

NONE

ALVIN DONALD

Name of Officiating Clergy or Authorized Officer

CANTOR- TEMPLE EMANUEL - JEWISH

Title and Religious Denomination or Office

6605 PARK HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 19 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45222

## Certificate of Marriage

State of Maryland

LICENSE NO.

130874

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HERBERT B JOHNSON**Age **49** Birthplace **MD.**  
(State)Groom's Residence **5039 FREDERICK RD**Marital Status **DIVORCED**Bride's Name **MARLENE V MONTAGUE**Age **37** Birthplace **MD.**  
(State)Bride's Residence **5039 FREDERICK RD**Marital Status **DIVORCED**

Relationship to groom if any

**NONE****JOHN C. BATES**License Date **DEC 4 85**Name of Officiating Clergy or Authorized Officer  
**MINISTER- ST. MARTIN CHURCH OF CHRIST**Title and Religious Denomination or Office  
**2118 MADISON AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **DEC 19 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45223

## Certificate of Marriage

State of Maryland

LICENSE NO.

131034

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	SHANE L. HART	Age	24	Birthplace	N.Y.
				(State)	
Groom's Residence	142 WEST EDGEVALE RD. A.A. CO., MD.	Marital Status	SINGLE		
Bride's Name	TERESA A. MUSTIN	Age	19	Birthplace	MD.
				(State)	
Bride's Residence	142 WEST EDGEVALE RD. A.A. CO., MD.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

FRED H. MERCER

Name of Officiating Clergy or Authorized Officer

License Date DEC. 17 85

MINISTER

Title and Religious Denomination or Office

TT

3804 9th BALTO., MD 21225

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 27 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45224

State of Maryland

LICENSE NO.

131046

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 25th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name DONALD RAY MORTONAge 27 Birthplace MD.  
(State)Groom's  
Residence 1612 E. OLIVER ST.Marital Status SINGLEBride's  
Name DIANNA COVINGTONAge 20 Birthplace N.C.  
(State)Bride's  
Residence 1608 E. OLIVER ST.Marital Status SINGLERelationship to groom if any NONEELDER THOMAS MCINTYRE

Name of Officiating Clergy or Authorized Officer

License Date DEC 1785APOSTOLIC ELDER

Title and Religious Denomination or Office

BALTIMORE, MARYLAND

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 27 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45225

State of Maryland

LICENSE NO.

129324

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 16th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	ARTHUR L. LEMON	Age	29	Birthplace	S. CAR.
				(State)	
Groom's Residence	163 S. MONASTERY AVE.	Marital Status	SINGLE		
Bride's Name	SANDRA A. AMES	Age	26	Birthplace	MD.
				(State)	
Bride's Residence	226 S. MONASTERY AVE.	Marital Status	SINGLE		

Relationship to groom if any NONE

License Date SEPT. 28 85

REV. WALTER BRONSON, JR

Name of Officiating Clergyman or Authorized Officer

PASTOR, NEW CHRISTIAN MSM.

Title and Religious Denomination or Office

3525 W. CATON AV.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 27 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45226

State of Maryland

LICENSE NO.  
131092

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24 day of Dec 1985

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **REGGIE JACOBS**Age **28** Birthplace **N. CAROLINA**  
(State)Groom's  
Residence **103 N. PATTERSON PK. AVENUE**Marital Status **SINGLE**Bride's  
Name **BOBBIE LYNN PRIOLA**Age **16** Birthplace **MARYLAND**  
(State)Bride's  
Residence **103 N. PATTERSON PK. AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **DEC. 19 85**

TT

Cabrin L. Hudson  
Name of Officiating Clergy or Authorized OfficerBaptist Minister  
Title and Religious Denomination or Office414 N. Luzerne Av.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office of

**DEC 27 1985**  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 35.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45227

## Certificate of Marriage

State of Maryland

LICENSE NO.

131205

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PATRICK J. MILLER, JR.** Age **34** Birthplace **MARYLAND**  
(State)

Groom's Residence **812 QUAIL STREET** Marital Status **SINGLE**

Bride's Name **MERI A. CUMMINGS** Age **21** Birthplace **MONTANA**  
(State)

Bride's Residence **1200 CRAIN HIGHWAY S.W. A.A. CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

REV. RICHARD H. OGLE, 4th

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 23** **85** PERKINS SQUARE BAPTIST CHURCH

Title and Religious Denomination or Office

2516 EDMONDSON AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 27 1985**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45228

## Certificate of Marriage

State of Maryland

LICENSE NO.

131114

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DEREK ANTHONY BEASLEY**Age **19** Birthplace **MD.**  
(State)Groom's Residence **3308 BURLIETH AV.**Marital Status **SINGLE**Bride's Name **PAMELA MARIA WILLIAMS**Age **18** Birthplace **MD.**  
(State)Bride's Residence **2848 BOARMAN AV.**Marital Status **SINGLE**Relationship to groom if any **NONE**DOUGLAS B. SANDS

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 18 85**PASTOR, HOWARD PARK UNITED METHODIST CHURCH

Title and Religious Denomination or Office

5024 GWYNN OAK AV. BALTO., MD 21207

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**DEC 27 1985**  
**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45229

LICENSE NO.

131104

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 24 day of Dec 1985

the following persons were by me united in marriage at

Balto Md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**RONNY MYERS**

Age

**28**

Birthplace

**MD.**

(State)

Groom's  
Residence

**3204 GARRISON BLVD.**

Marital Status

**SINGLE**

Bride's  
Name

**MARZELL L. ATKINSON**

Age

**27**

Birthplace

**MD.**

(State)

Bride's  
Residence

**3204 GARRISON BLVD.**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

Richard Ogle

Name of Officiating Clergy or Authorized Officer

Minister

Title and Religious Denomination or Office

2516 Edmondson Ave.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 27 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45230

## Certificate of Marriage

State of Maryland

LICENSE NO.

130602

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DERRICK L BROWN

Age 22

Birthplace

MD.

(State)

SINGLE

Groom's  
Residence

1238 ROSSITER AVE

Marital Status

Bride's  
Name

ELLA L MORGAN

Age 18

Birthplace

MD.

(State)

SINGLE

Bride's  
Residence

1238 ROSSITER AVE

Marital Status

Relationship to groom if any

NONE

License Date

NOV 18 85

JW

HARRY PARKER

Name of Officiating Clergy or Authorized Officer

JEHOVAH'S WITNESS

Title and Religious Denomination or Office

2868 W. BALTIMORE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 1 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

# Certificate of Marriage

State of Maryland

85-45231

LICENSE NO.

130695

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	MARK B. BLACKERT	Age	22	Birthplace	MD.
				(State)	
Groom's Residence	229 WESTTOWN RD. BALTO.CO.,MD.	Marital Status	SINGLE		
Bride's Name	KATHLEEN J. LANGAN	Age	21	Birthplace	MD.
				(State)	
Bride's Residence	100 GLENRAE DR. BALTO.CO.,MD.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

REV. JAMES H. DOWDY

Name of Officiating Clergy or Authorized Officer

License Date

DEC 4 85

PASTOR ST.

Title and Religious Denomination or Office

775 N. HAMBURG ST. 21230

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 11 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45232

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130716

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JAMES J DOYLE

Age 34 Birthplace MD.  
(State)Groom's  
Residence

6 SYLVAN PK CT BALTO CO MD

Marital Status SINGLEBride's  
Name

DEBRA A BYRNES

Age 27 Birthplace MD.  
(State)Bride's  
Residence

6 SYLVAN PK CT BALTO CO MD

Marital Status SINGLE

Relationship to groom if any

NONE

REV. ROBERT A. ARMSTRONG

Name of Officiating Clergy or Authorized Officer

License Date NOV. 29 85

RECTOR OF THE CATHEDRAL OF MARY OUR QUEEN

Title and Religious Denomination or Office

5300 N. CHARLES ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on DEC 11 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45233

## Certificate of Marriage

State of Maryland

LICENSE NO.

130211

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANDREW C. SIMMONS** Age **27** Birthplace **S. CAR.**  
 (State)  
 Groom's Residence **2324 AIKEN ST.** Marital Status **SINGLE**  
 Bride's Name **DELORIS M. MORRISON** Age **23** Birthplace **S. CAR/**  
 (State)  
 Bride's Residence **2907 VIOLET AVE.** Marital Status **SINGLE**

Relationship to groom if any **NONE****MACKIE J. COOKLEY**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 23 85****PASTOR BAPTIST**

Title and Religious Denomination or Office

**1136 COOKS LA. BALTO., MD**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 1 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45234

Certificate of Marriage

State of Maryland

LICENSE NO.  
129630

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 8TH day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**JOHN W GOODMAN**

Age **26**

Birthplace **MD.**

(State)  
**SINGLE**

Groom's  
Residence

**1215 OREMS RD BALTO CO MD**

Marital Status

Bride's  
Name

**CYNTHIA M KOLB**

Age **27**

Birthplace **MD.**

(State)  
**SINGLE**

Bride's  
Residence

**2210 EASTERN AVE**

Marital Status

**NONE**

Relationship to groom if any

**REV. FRANCIS J. OKROY, S.CH.**

Name of Officiating Clergy or Authorized Officer

**ASSOCIATE PASTOR HOLY ROSARY R. C. CHURCH**

Title and Religious Denomination or Office

**408 S. CHESTER ST. BALTIMORE, MD 21231**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 11 1985**

License Fee \$ 25.00

**SANDRA E. BAILEY CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45235

*Certificate of Marriage*  
*State of Maryland*

LICENSE NO.  
 130885

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
 Name **BRIAN W. DIETER**

Age **24** Birthplace **MD.**  
 (State)

Groom's  
 Residence **4204 STANWOOD AV.**

Marital Status **SINGLE**

Bride's  
 Name **PATRICIA A. RINKER**

Age **22** Birthplace **MD.**  
 (State)

Bride's  
 Residence **4204 STANWOOD AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**DAVID LEARY**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6 85**

**PASTOR- SHRINE OF LITTLE FLOWER R.C. CHURCH**

Title and Religious Denomination or Office

**2854 BRENDAN AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 10 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45236

## Certificate of Marriage

State of Maryland

LICENSE NO.

130799

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **JOHN HAYDN MERRILL**Age **25** Birthplace **MD.**

Groom's

Residence **411 LYMAN AV.**Marital Status **SINGLE**

Bride's

Name **CHRISTINE SCARLETT HERMAN**Age **22** Birthplace **MD.**  
(State)

Bride's

Residence **605 SOMERSET RD.**Marital Status **SINGLE**Relationship to groom if any **NONE****HARRY E. SHELLEY**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 28 85****RECTOR- ST. MICHAEL & ALL ANGELS EPISCOPAL**

Title and Religious Denomination or Office

**2013 ST. PAUL ST. CHURCH**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 10 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45237

## State of Maryland

LICENSE NO.

130891

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WEBSTER G SYKES**

Age **25** Birthplace **MD.**  
(State)

Groom's Residence **5900 FRANKFORD AVE**

Marital Status **SINGLE**

Bride's Name **VALERIE B BRADFORD**

Age **24** Birthplace **MD.**  
(State)

Bride's Residence **5900 FRANKFORD AVE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**AARON B. CLAXTON**

Name of Officiating Clergy or Authorized Officer

**PASTOR- NEW CREATION CHRISTIAN CHURCH**

Title and Religious Denomination or Office

**5401 FRANKFORD AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 10 1985**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.50

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45238

## Certificate of Marriage

State of Maryland

LICENSE NO.

130567

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KEVIN GLOVER**Age **29** Birthplace **MD.**Groom's Residence **17 N BERNICE AVE**Marital Status **SINGLE**Bride's Name **SHARON T BLACK**Age **25** Birthplace **MD.**Bride's Residence **19 N BERNICE AVE**Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **NOV.19 85**ARTHUR J. BENN

Name of Officiating Clergy or Authorized Officer

PASTOR- BAPTIST

Title and Religious Denomination or Office

1650 BURNWOOD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 10 1985**License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45239

## State of Maryland

 LICENSE NO.  
130708

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 1st day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	LOUIS M. COOKE	Age	76	Birthplace	VA.
				(State)	
Groom's Residence	4706 WILERN AVE.	Marital Status	DIVORCED		
Bride's Name	AMBROZINE A. GARRIS	Age	63	Birthplace	JAMAICA
				(State)	
Bride's Residence	4706 WILERN AVE.	Marital Status	WIDOW		
Relationship to groom if any	NONE				

 License Date **NOV. 25,**

85

RAYMOND L. JOHNSON

Name of Officiating Clergy or Authorized Officer

PASTOR- HIGH ROCK BAPT. CHURCH

Title and Religious Denomination or Office

3345 W. GARRISON AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

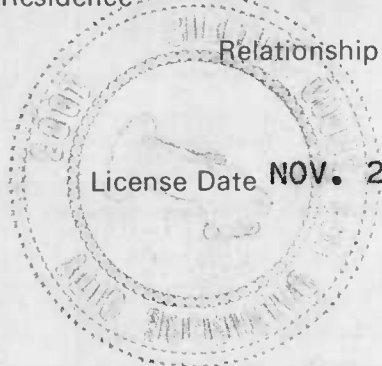
**DEC 10 1985**
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$

**25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45240

LICENSE NO.  
130766

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	THOMAS A. MOORE	Age	82	Birthplace	MD.
				(State)	
Groom's Residence	2150 HOLLIN ST.	Marital Status	WIDOWER		
Bride's Name	EVELYN R. NOBLE	Age	56	Birthplace	MD.
				(State)	
Bride's Residence	2150 HOLLIN ST.	Marital Status	WIDOW		

Relationship to groom if any NONE

JAMES G. REAVES

Name of Officiating Clergy or Authorized Officer

License Date NOV. 27

85

ASSISTANT PASTOR - APOSTOLIC

Title and Religious Denomination or Office

3005 HANLON AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 10 1985

License Fee \$ 55.00

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45241

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130784

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MURRAY E. MYERS, 4TH. Age 21 Birthplace MD.  
(State)Groom's Residence 2058 DRUID PARK DR. Marital Status SINGLEBride's Name LISA M. PEZZICA Age 18 Birthplace MD.  
(State)Bride's Residence 2058 DRUID PARK DR. Marital Status SINGLERelationship to groom if any NONELicense Date NOV 27 85JAMES M. WOODY, JR.  
Name of Officiating Clergy or Authorized OfficerMINISTER-BAPTIST  
Title and Religious Denomination or Office3720 YOLANDO RD.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on DEC 10 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45242

## Certificate of Marriage

State of Maryland

LICENSE NO.

130953

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **EDDIE E. ROBERTS ,SR.** Age **44** Birthplace **MD.**  
(State)Groom's Residence **554 GOLD ST.** Marital Status **SINGLE**Bride's Name **ILEAN G. MC CREA** Age **37** Birthplace **VA.**  
(State)Bride's Residence **3600 WHEELER AVE.** Marital Status **DIVORCED**Relationship to groom if any **NONE****EDSON C. SARGEANT**

Name of Officiating Clergy or Authorized Officer

**CLERYGYMAN CHURCH OF THE NAZARENE**

Title and Religious Denomination or Office

**PO. BPX 37 DOVE, DE 19903**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 31 1985**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the CourtLicense Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45243

## Certificate of Marriage

State of Maryland

LICENSE NO.

131032

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	KEVIN M. HULL	Age	19	Birthplace	MD.
				(State)	
Groom's Residence	7416 LESSADA DR. BALTO.CO., MD.	Marital Status	SINGLE		
Bride's Name	LORRAINE J. HERRON	Age	19	Birthplace	MD.
				(State)	
Bride's Residence	12 MARDREW LA.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

License Date DEC. 26, 85

THE REV. ALBERT K. LANE, JR

Name of Officiating Clergy or Authorized Officer

PASTOR

Title and Religious Denomination or Office

5130 GREENWICH AV. 21229

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00

SAUNDRA E. DANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45244

LICENSE NO.

131041

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ARIE D WHITING

Age 25

Birthplace MD.  
(State)

Groom's  
Residence

4501 WAKEFIELD RD

Marital Status SINGLE

Bride's  
Name

CHIMENE M WRIGHT

Age 22 Birthplace MD.  
(State)

Bride's  
Residence

1103 SPRINGFIELD AVE

Marital Status SINGLE

Relationship to groom if any

NONE

License Date DEC. 23, 85

REV. ANGUS A. SMITH

Name of Officiating Clergy or Authorized Officer

MINISTER GOSPEL JESUS CHRIST

Title and Religious Denomination or Office

1839 N. REGEISTER ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is true and correct of a record filed in this

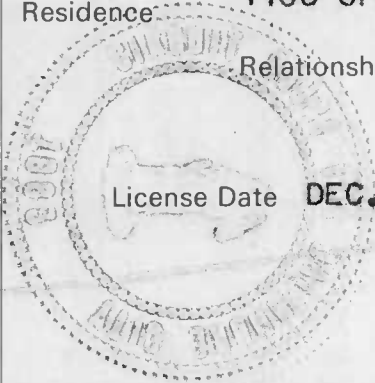
office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45245

## Certificate of Marriage

State of Maryland

LICENSE NO.

131045

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 12<sup>th</sup> day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **STEPHEN F. MESZAROS**Age **44** Birthplace **MD.**  
(State)Groom's  
Residence **104 TEAL CIR. WO.CO., MD**Marital Status **DIVORCED**Bride's  
Name **CATHY J. GODFREY**Age **31** Birthplace **N.J.**  
(State)Bride's  
Residence **104 TEAL CIR. WO.CO., MD**Marital Status **DIVORCED**Relationship to groom if any **NONE****WAYNE M. MOULDER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 18 85****MINISTER**

Title and Religious Denomination or Office

**309 W. LANVALE ST**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true and correct record filed in this

office on \_\_\_\_\_

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

# Certificate of Marriage

State of Maryland

85-45246

LICENSE NO.

131058

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **GREGORY ACREE**

Age **22** Birthplace **MD.**  
(State)

Groom's  
Residence **5931 RADECKE AVENUE**

Marital Status **SINGLE**

Bride's  
Name **DRENDA D. HOLMES**

Age **21** Birthplace **MD.**  
(State)

Bride's  
Residence **2437 JEFFERSON STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **DEC 16** 85 **REV. THEODORE D ADDISON, SR**  
Name of Officiating Clergy or Authorized Officer

**PASTOR RISING ZION BAPTIST CHURCH**

Title and Religious Denomination or Office

**1226 N. BRADFORD ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

**DEC 31 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45247

## State of Maryland

LICENSE NO.

131131

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 29th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **BENNIE MELVIN WATSON**

Age **25** Birthplace **ALABAMA**  
(State)

Groom's Residence **1103 GLEMSFORD ROAD**

Marital Status **SINGLE**

Bride's Name **BERNADETTE LEE MC CANT**

Age **21** Birthplace **MARYLAND**  
(State)

Bride's Residence **1103 GLEMSFORD ROAD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**REV. VAN LEE, SR**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 19 85**

**CONSTANE C. C. CHURCH**

Title and Religious Denomination or Office

**3621 REISTERSTOWN RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of the record filed in this

office on \_\_\_\_\_

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

TT

DEC 31 1985

2

85-45248

## Certificate of Marriage

State of Maryland

LICENSE NO.

131189

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **JAMES ROY MC DOUGAL**Age **58** Birthplace **N.C.**  
(State)Groom's  
Residence **101 N. FULTON AVENUE**Marital Status **DIVORCED**Bride's  
Name **MINNIE DELORES HILL**Age **41** Birthplace **MD.**  
(State)Bride's  
Residence **101 N. FULTON AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE**

REV. CLARENCE R. YERBY

Name of Officiating Clergy or Authorized Officer

PASTOR ST. ABRAHAM BAPTIST CHURCH

Title and Religious Denomination or Office

1124-26 W. NORTH AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

License Fee \$ \_\_\_\_\_

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45249

## Certificate of Marriage

State of Maryland

LICENSE NO.

131263

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of DECEMBER 19 85  
 the following persons were by me united in marriage at baltimore, md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	EARL E. WELSH, JR.	Age	33	Birthplace	MD.
				(State)	
Groom's Residence	1822 WILHELM ST.	Marital Status	DIVORCED		
Bride's Name	D SHARON L. BOWDOIN	Age	30	Birthplace	MD.
				(State)	
Bride's Residence	1822 WILHELM ST.	Marital Status	DIVORCED		
Relationship to groom if any	NONE				

License Date DEC 26 85

JW

ROBERT J. KRETZSCHMAR

Name of Officiating Clergy or Authorized Officer

PASTOR BETHANY LUTHERAN CHURCH

Title and Religious Denomination or Office

1022 HAVERNHILL RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45250

## Certificate of Marriage

State of Maryland

LICENSE NO.  
129672

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6<sup>th</sup> day of Dec. 19 85

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **BENJAMIN FREDERICK LUTHARDT**Age **30** Birthplace **MD.**  
(State)Groom's  
Residence **1116 SARGEANT ST.**Marital Status **DIVORCED**Bride's  
Name **DIANE JEARLDINE WOLFE**Age **25** Birthplace **MD.**  
(State)Bride's  
Residence **126-3RD AV. BALTO. CO., MD**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **SEPT. 30 85**Charles L. Wilder  
Name of Officiating Clergy or Authorized OfficerMinister  
Title and Religious Denomination or Office1932 Wilkins Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

2

85-45251

## Certificate of Marriage

State of Maryland

LICENSE NO.

131063

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 26 day of Dec 19 85

the following persons were by me united in marriage at

Balt. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ALBERT KINNEY

Age 70

Birthplace

KENTUCKY  
(State)Groom's  
Residence

7334 WALDMAN AVE.

Marital Status WIDOWER

Bride's  
Name

GEORGIE MAE NEWMAN

Age 49

Birthplace

W. VA.  
(State)Bride's  
Residence

147 N. MILTON AVE.

Marital Status DIVORCED

Relationship to groom if any

NONE

License Date

DEC 16

85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45252

## Certificate of Marriage

State of Maryland

LICENSE NO.

131062

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27 day of Dec. 1985the following persons were by me united in marriage at Balt. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LAWRENCE J. GREDLEIN** Age **40** Birthplace **MD.**  
(State)Groom's Residence **1509 CEDARWOOD DR. HARFORD CO., MD.** Marital Status **DIVORCED**Bride's Name **SHARON A. KIRCHNER** Age **37** Birthplace **MD.**  
(State)Bride's Residence **1509 CEDARWOOD DR. HARFORD CO., MD.** Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **DEC. 16 85**

tt

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45253

## Certificate of Marriage

State of Maryland

LICENSE NO.

131051

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24 day of Dec 1985

the following persons were by me united in marriage at

Baltimore

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ERNEST E BRILEY JR

Age

19

Birthplace

MD.

(State)

Groom's

1213 E 29TH ST

Residence

Marital Status

SINGLE

Bride's  
Name

GWENDOLYN G JONES

Age

18

Birthplace

MD.

(State)

Bride's

106 EDGEWOOD ST

Residence

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

DEC. 16 85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45254

## Certificate of Marriage

State of Maryland

LICENSE NO.

131028

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27 day of Dec 1985

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **EMMANUEL B. VAUGHN**Age **46** Birthplace **MD.**  
(State)Groom's  
Residence **241 S. HERRING COURT**Marital Status **DIVORCED**Bride's  
Name **BETTY JEAN SMUTH**Age **47** Birthplace **S.C.**  
(State)Bride's  
Residence **241 S. HERRING COURT**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **DEC 16** **85**

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45255

LICENSE NO.

130815

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 23 day of Dec. 1985

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**TYRONE VANCE**

Age **25**

Birthplace

**MD.**  
(State)

Groom's  
Residence

**2003 ASHLAND AV.**

Marital Status **SINGLE**

Bride's  
Name

**MARIA MARSHALL**

Age **33**

Birthplace

**MD.**  
(State)

Bride's

Residence

**1036 UPNOR RD.**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

License Date

Aggie L. Brown  
Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office

Balti. Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45256

## Certificate of Marriage

State of Maryland

LICENSE NO.

130589

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27<sup>th</sup> day of Dec 19 85

the following persons were by me united in marriage at

Balto. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>CHATMON J. THOMAS</b>	Age	<b>32</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>5925 G. RADECKE AVE.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>CHARRISSE K. CROSBY</b>	Age	<b>32</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>1420 W. MT. ROYAL AVE.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **NOV. 18 85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 300**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45257

## Certificate of Marriage

State of Maryland

LICENSE NO.

130571

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21 day of Dec. 1985

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CECIL V. CROWELL, 3RD.**Age **24** Birthplace **MD.**  
(State)Groom's Residence **1026 B. HOLLINS ST.**Marital Status **SINGLE**Bride's Name **SHARON B. MIDDLEBROOK**Age **30** Birthplace **FLA.**  
(State)Bride's Residence **1026 B. HOLLINS ST.**Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **NOV 15 85**

JW

Arthur Jones.

Name of Officiating Clergy or Authorized Officer

Baptist

Title and Religious Denomination or Office

3684 Farn Hill Rd.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and for-  
warded to the Division of Vital Records, State Depart-  
ment of Health and Mental Hygiene, 201 W. Preston Street,  
Baltimore, MD 21201, upon receipt of page 3, copy of  
Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45258

State of Maryland

LICENSE NO.  
130878

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21 day of Dec 1985

the following persons were by me united in marriage at

Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MILTON A. MAYO, JR

Age

32

Birthplace

MD.  
(State)Groom's  
Residence

1528 E. BALTIMORE ST.

Marital Status WIDOWER

Bride's  
Name

LORA D. GRAVES

Age

31

Birthplace

MD.  
(State)Bride's  
Residence

1528 E. BALTIMORE ST.

Marital Status SINGLE

Relationship to groom if any

NONE

License Date

DEC. 17 85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00

Signature — Clerk of the Court

12-30-85  
SAUNDRA E. BANKS, CLERK

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 West Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45259

## Certificate of Marriage

State of Maryland

LICENSE NO.

131179

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 29 day of Dec. 1985

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

THOMAS WILLIAM MILLER

Age 20

Birthplace

MD.  
(State)

Groom's

Residence

2827 HOLLINS FERRY RD.

Marital Status SINGLE

Bride's

Name

JEANNETTE MARIE ARENZ

Age 19

Birthplace

MD.  
(State)

Bride's

Residence

2827 HOLLINS FERRY RD.

Marital Status SINGLE

Relationship to groom if any

NONE

License Date DEC. 23 85

TT

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00

12-30-85  
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45260

## Certificate of Marriage

State of Maryland

LICENSE NO.

131107

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 25 day of Dec 1985

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

BLANE D CARTER

Age

30

Birthplace

KY

(State)

Groom's

Residence

2032 ASHLAND AVE

Marital Status

SINGLE

Bride's  
Name

ELAINE LEE

Age

32

Birthplace

MD.

(State)

Bride's

Residence

2510 W PRATT ST

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

DEC. 18 85

Arthur R. Shields

Name of Officiating Clergy or Authorized Officer

Methodist

Title and Religious Denomination or Office

3306

Derwinston Dr.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85

License Fee \$

25.00SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45261

## Certificate of Marriage

State of Maryland

LICENSE NO.

131101

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27 day of Dec 1985

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **JOSEPH R. BRUNO**

Age

26 Birthplace

MD.

(State)

Groom's

Residence **3206 LAKE AVENUE**

Marital Status

**SINGLE**

Bride's

Name **SUZANNE R. SIKORSKY**

Age

24 Birthplace

MD.

(State)

Bride's

Residence **2737 CHESTERFIELD AVENUE**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**License Date **DEC. 18****85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.0012-30-85  
**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45262

## Certificate of Marriage

State of Maryland

LICENSE NO.

131015

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **STEVEN SCHWARZKOPF WRIGHT**Age **29** Birthplace **MD.**  
(State)Groom's Residence **3632 COLUMBUS DR.**Marital Status **DIVORCED**Bride's Name **TYNTHIA TESSA BRINKLEY**Age **27** Birthplace **MD.**  
(State)Bride's Residence **4526 PARKSIDE DR.**Marital Status **SINGLE**Relationship to groom if any **NONE**REV. HERMAN A. FORD

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 18,****85**BAPTIST-PASTOR

Title and Religious Denomination or Office

1215 E. MONUMENT ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 27 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45263

## Certificate of Marriage

State of Maryland

LICENSE NO.

130926

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **WILLIAM H CLYBURN**Age **23** Birthplace **ILL**  
(State)Groom's  
Residence **226 DIVISION AVE BALTO CO MD**Marital Status **SINGLE**Bride's  
Name **CONNIE M VELENOVSKY**Age **19** Birthplace **MD.**  
(State)Bride's  
Residence **4901 MORELLO RD**Marital Status **SINGLE**Relationship to groom if any **NONE**REV. SARA E. BECHTEL

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6 85**MINISTER-LUTHERAN CHURCH IN AMERICA

Title and Religious Denomination or Office

2715 GRINDON AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 27 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45264

LICENSE NO.

130089

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22nd day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LARRY DAVIS**

Age **34** Birthplace **NEW YORK**  
(State)

Groom's Residence **1610 N. HILTON STREET**

Marital Status **DIVORCED**

Bride's Name **PATRICIA ANN KELLY**

Age **30** Birthplace **MARYLAND**  
(State)

Bride's Residence **1610 N. HILTON STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**REV! CONELL WILSON**

Name of Officiating Clergy or Authorized Officer

**BAPTIST**

Title and Religious Denomination or Office

**925 BRIDGEVIEW RD**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 27 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date

**OCT. 18 85**

License Fee \$

**25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45265

## Certificate of Marriage

State of Maryland

LICENSE NO.

131148

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	ROBERT B. GOLDSMITH	Age	34	Birthplace	MD.
Groom's Residence	4 BOULDER LANE	Marital Status	SINGLE		
Bride's Name	LESLIE C. HURKA	Age	28	Birthplace	MD.
Bride's Residence	300 E. 32ND. STREET	Marital Status	SINGLE		
Relationship to groom if any	NONE				

License Date DEC. 20 85

MICHAEL S. FRANCH

Name of Officiating Clergy or Authorized Officer

LEADER, AMERICAN ETHICAL UNION

Title and Religious Denomination or Office

607 E. 34th ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45266

## Certificate of Marriage

State of Maryland

LICENSE NO.

131160

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>GARY J SAUNDERS</b>	Age	<b>23</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>1407 WINSTON AVE</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>LISA M DIXON</b>	Age	<b>21</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>1407 WINSTON AVE</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **DEC. 23** **85**W. L. CLAYTON

Name of Officiating Clergy or Authorized Officer

PASTOR MACEDONIA BAPTIST CHURCH

Title and Religious Denomination or Office

903 N. FREMONT AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 31 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45267

# Certificate of Marriage

## State of Maryland

LICENSE NO.

131196

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of DECEMBER 19 85

the following persons were by me united in marriage at mm BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

LAMONT M CAHILL

Age

31

Birthplace

MD.  
(State)Groom's  
Residence

5559 MIDWOOD AVE

Marital Status

DIVORCED

Bride's  
Name

ELIZABETH D STENLEY

Age

21

Birthplace

MD.  
(State)Bride's  
Residence

65 FREDERICK ST CARROLL CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE

ERIC G. PEACHER

Name of Officiating Clergy or Authorized Officer

License Date DEC 26 1985

jw

MINISTER/GRACE UNITED METHODIST CHURCH

Title and Religious Denomination or Office

5407 N. CHARLES ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00DEC 31 1985  
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court



2

85-45268

## Certificate of Marriage

State of Maryland

LICENSE NO.

130664

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28 day of Dec 1985

the following persons were by me united in marriage at

Balto. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WALTER CALVIN JEFFREYES, JR**Age **34** Birthplace **MD.**  
(State)Groom's Residence **2412 W. PRESBURY ST.**Marital Status **SINGLE**Bride's Name **DARLENE LIGHTNER**Age **24** Birthplace **MD.**  
(State)Bride's Residence **2412 W. PRESBURY ST.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 21 85**Name of Officiating Clergy or Authorized Officer  
Glenn WinstonTitle and Religious Denomination or Office  
MinisterAddress of Clergy or Authorized Officer  
1532 W. Gay ST

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-31-85  
**SAUNDRA E. BANKS, CLERK**

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45269

## Certificate of Marriage

State of Maryland

LICENSE NO.

130684

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28 day of Dec 1985

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LARRY STEVEN BROWN**Age **27** Birthplace **MD.**  
(State)Groom's Residence **2647 HAMPDEN AV.**Marital Status **SINGLE**Bride's Name **BERNICE MARIE PLITT**Age **24** Birthplace **MD.**  
(State)Bride's Residence **2647 HAMPDEN AV.**Marital Status **SINGLE**Relationship to groom if any **NONE**Glenn Winslow

Name of Officiating Clergy or Authorized Officer

Minist

Title and Religious Denomination or Office

1532 N. Gay ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-31-85  
**SAUNDRA E. BANKS, CLERK**

License Fee \$

25.00

Signature — Clerk of the Court

2

85-45270

## Certificate of Marriage

State of Maryland

LICENSE NO.

130974

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28 day of Dec 1985

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

RALPH RUBIN

Age

47

Birthplace

MD.  
(State)Groom's  
Residence

6212 CROSS COUNTRY BLVD

Marital Status

DIVORCED

Bride's  
Name

TERENCE KNOLL

Age

40

Birthplace

MD.  
(State)Bride's  
Residence

1518 PARK AV.

Marital Status

DIVORCED

Relationship to groom if any **NONE**License Date **DEC. 12,**

85

Michael Franch  
Name of Officiating Clergy or Authorized OfficerMinister  
Title and Religious Denomination or Office607 E. 34th ST  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-31-85  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45271

State of Maryland

LICENSE NO.

131254

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of Dec. 1985

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**CHARLES EDWARD PEDDICORD, JR.**Age **36**

Birthplace

**MD.**

(State)

Groom's  
Residence**2110 ASHTON STREET**

Marital Status

**DIVORCED**Bride's  
Name**JUDITH ANN CROCKETT**Age **39**

Birthplace

**MD.**

(State)

Bride's  
Residence**3427 SANTEE ROAD****BALTO. CO., MD.**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

License Date

**DEC. 26****85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-31-85

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

## Certificate of Marriage

85-45272

State of Maryland

LICENSE NO.  
131190

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28 day of Dec 1985

the following persons were by me united in marriage at

Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name WILLIAM B RODWELLAge 23 Birthplace VA  
(State)Groom's Residence 2436 LAKEVIEW AVEMarital Status SINGLEBride's Name SHARON LIGHTNERAge 23 Birthplace MD.  
(State)Bride's Residence 2436 LAKEVIEW AVEMarital Status SINGLERelationship to groom if any NONEGlenn Winslow

Name of Officiating Clergy or Authorized Officer

License Date DEC. 23 85

Title and Religious Denomination or Office

1532 W. Gay ST

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-31-85License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

tt

2

85-45273

## Certificate of Marriage

State of Maryland

LICENSE NO.

131025

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 25 day of Dec 1985the following persons were by me united in marriage at Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

2 Groom's  
Name **JUAN ROBERT WOOD**Age **35** Birthplace **MD.**  
(State)2 Groom's  
Residence **3914 GWYNN FALLS PKWY.**Marital Status **DIVORCED**2 Bride's  
Name **JUDITH HIPPERT**Age **35** Birthplace **N.Y.**  
(State)2 Bride's  
Residence **3914 GWYNN FALLS PKWY.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **DEC.13,** **85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 12-31-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45274

## State of Maryland

LICENSE NO.

131119

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 28 day of Dec. 1985

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KELVIN T WILLIAMS**

Age **21** Birthplace **MD.**  
(State)

Groom's Residence **1544 BRUCE ST**

Marital Status **SINGLE**

Bride's Name **LILLIE A HARRIS**

Age **20** Birthplace **MD.**  
(State)

Bride's Residence **4012 BOARMAN AVE**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date **DEC. 18 85**

TT

Olivia M. Mays  
Name of Officiating Clergy or Authorized Officer

Baptist Minister  
Title and Religious Denomination or Office

Balto. Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 12-31-85

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45275

State of Maryland

LICENSE NO.

131134

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27 day of Dec 1985

the following persons were by me united in marriage at

Balti Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	FRED A. LANGE, JR.	Age	33	Birthplace	MD.
				(State)	
Groom's Residence	819 WINANS WAY	Marital Status	DIVORCED		
Bride's Name	DONNA J. PORTER	Age	32	Birthplace	MD.
				(State)	
Bride's Residence	819 WINANS WAY	Marital Status	DIVORCED		

Relationship to groom if any NONELicense Date DEC. 19, 85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12.31.85  
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45276

## Certificate of Marriage

State of Maryland

LICENSE NO.  
131158

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28<sup>th</sup> day of Dec. 1985

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DAVID M. LINSALATA

Age 20

Birthplace

MD.

(State)

Groom's  
Residence

4410 WHITE AVE

Marital Status

SINGLE

Bride's  
Name

WANDA J. JAGERMAN

Age 21

Birthplace

MD.

(State)\*

Bride's  
Residence

3315 ROSSITER ST

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

DEC. 23 85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

74

85-45277

# Certificate of Marriage

State of Maryland

LICENSE NO.

130572

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 24th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

LESTER F LOVE JR

Age 29

Birthplace MD.  
(State)Groom's  
Residence

3604 TELMAR RD BALTO CO MD

Marital Status

SINGLE

Bride's  
Name

GARNETTA T FIELDS

Age 25

Birthplace MD.  
(State)Bride's  
Residence

832 BRIDGEVIEW RD

Marital Status

SINGLE

NONE

Relationship to groom if any

License Date

NOV 15

JW

REV DR. JAMES O. HASKINS

Name of Officiating Clergy or Authorized Officer

85 PASTOR LITTLE MACEDONIA BAPTIST CHURCH

Title and Religious Denomination or Office

3821 FERNDAL AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 31 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45278

## Certificate of Marriage

State of Maryland

LICENSE NO.

130736

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 1<sup>ST</sup>. day of DECEMBER 19 85

BALTIMORE, MD.

the following persons were by me united in marriage at

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name KEVIN FRANCIS MC CARTIN Age 22 Birthplace MD.  
(State)Groom's  
Residence 1522 PICKETT RD. BALTO. CO., MD. Marital Status SINGLEBride's  
Name TRACY ELIZABETH KLENDER Age 19 Birthplace MD.  
(State)Bride's  
Residence 2108 FOUNTAIN HILL DR. BALTO. CO., MD. Marital Status SINGLE

Relationship to groom if any NONE

DAVID L. SHIPLEY

Name of Officiating Clergy or Authorized Officer

License Date NOV. 25 85

PASTOR- UNITED METHODIST

Title and Religious Denomination or Office

1000 W. 38TH. ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

25.00

tt

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-4527-9

## Certificate of Marriage

State of Maryland

LICENSE NO.  
131086

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21<sup>st</sup> day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ROBERT CURTIS O'NEIL**Age **22** Birthplace **MD.**  
(State)Groom's  
Residence **21 NORTH EAST AV.**Marital Status **SINGLE**Bride's  
Name **SONDRA LEE GARRETT**Age **20** Birthplace **MD.**  
(State)Bride's  
Residence **21 NORTH EAST AV.**Marital Status **SINGLE**Relationship to groom if any **NONE**REV. **ROBERT HENRY BROOKMAN**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 18 85****ELDER UNITED METHODIST PASTOR**

Title and Religious Denomination or Office

**3403 GOUGH ST. BALTIMORE, MD 21224**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on:

**DEC 23 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45280

## Certificate of Marriage

State of Maryland

LICENSE NO.

130847

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS WADE FITCH**Age **36** Birthplace **NEW YORK**  
(State)Groom's Residence **1432 N. BOND STREET**Marital Status **DIVORCED**Bride's Name **CECELIA MELISSA DUNCAN**Age **25** Birthplace **NEW YORK**  
(State)Bride's Residence **1432 N. BOND STREET**Marital Status **SINGLE**Relationship to groom if any **NONE**

REV. TIMOTHY SIMMONS

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 2 85****ASST. PASTOR WAYLAND BAPTIST CHURCH**

Title and Religious Denomination or Office

**3200 GARRISON BLVD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 3 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45281

## Certificate of Marriage

State of Maryland

LICENSE NO.

130872

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MYRON L FULTON

Age 22

Birthplace

MD.

(State)

Groom's  
Residence

2701 WOODSDALE AVE

Marital Status

SINGLE

Bride's  
Name

ANNETTE D GOODMAN

Age 19

Birthplace

VA

(State)

Bride's  
Residence

718 E 21ST STREET

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

DEC 4 85

WILLIE M. JACKSON

Name of Officiating Clergy or Authorized Officer

PASTOR-HOLINESS

Title and Religious Denomination or Office

2816 DENHAM CIRCLE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45282

## Certificate of Marriage

State of Maryland

LICENSE NO.

131065

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 19 day of December 1985

the following persons were by me united in marriage at

Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

RAPHAEL TERRY

Age 46

Birthplace

MD.  
(State)

Groom's

Residence

2220 E. CHASE STREET

Marital Status

DIVORCED

Bride's

Name

MARLENE G. ROBINSON

Age 37

Birthplace

MD.  
(State)

Bride's

Residence

2220 E. CHASE STREET

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date DEC. 18, 85

Name of Officiating Clergy or Authorized Officer

Rev. Gertrude Coleman  
Disciple Pent. Holiness Church

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

111 W. Centre St. #706

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45283

## Certificate of Marriage

State of Maryland

LICENSE NO.

51753

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL W OLSZEWSKI**Age **27** Birthplace **MD.**  
(State)Groom's Residence **2815 HUDSON ST**Marital Status **SINGLE**Bride's Name **IRIS M STOUTEN**Age **29** Birthplace **MD.**  
(State)Bride's Residence **1013 S LINWOOD AVE**Marital Status **SINGLE**

Relationship to groom, if any

**NONE****MATTHEW KOTKOWSKI**

Name of Officiating Clergyman or Authorized Officer

**PRIEST- ROMAN CATHOLIC**

Title and Religious Denomination or Office

**700 S. ANN STREET**

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 20 1985

*Paul J. Chester*

Signature-Clerk of the Court

License Fee - Resident \$  
Non-Resident \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 301 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

85-45284

State of Maryland

LICENSE NO.

130619

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITHOLIC  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

GREGORY E. COLEMAN

Age 26

Birthplace INDIANA  
(State)Groom's  
Residence

2435 LAKEVIEW AVENUE

Marital Status SINGLE

Bride's  
Name

ROBIN DENISE BROWN

Age 25

Birthplace MARYLAND  
(State)Bride's  
Residence

2435 LAKEVIEW AVENUE

Marital Status SINGLE

Relationship to groom if any

NONE

LUCY SHAW

Name of Officiating Clergy or Authorized Officer

PASTOR- HOUR OF MIRACLE TEMPLE

Title and Religious Denomination or Office

2012 PULASKI ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 20 1985

License Fee \$

35.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45285

## State of Maryland

LICENSE NO.

131109

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL JAMES BYAN**

Age **22** Birthplace **MD.**  
(State)

Groom's Residence **1744 CLARKSON ST.**

Marital Status **SINGLE**

Bride's Name **ZINA FAYE CALLIS**

Age **21** Birthplace **MD.**  
(State)

Bride's Residence **1745 HANOVER ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**REV. JAMES L. HERBERSON**

Name of Officiating Clergy or Authorized Officer

**LUTHERN**

Title and Religious Denomination or Office

**1613 LIGHT ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 23 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45286

## Certificate of Marriage

State of Maryland

LICENSE NO.

130963

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROGER R. HOWARD**Age **32** Birthplace **VA.**  
(State)Groom's Residence **1535 BALDWIN ST.**Marital Status **DIVORCED**Bride's Name **TERRI L. BAYNE**Age **21** Birthplace **MD.**  
(State)Bride's Residence **1535 BALDWIN ST.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **DEC. 10 85**~~DAVID W. RIMBACH~~

Name of Officiating Clergy or Authorized Officer

**MINISTER-UNITED METHODIST CHURCH**

Title and Religious Denomination or Office

**3449 FALLS RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45287

## Certificate of Marriage

State of Maryland

LICENSE NO.

130959

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21ST day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>DAVID B. BURNS</b>	Age	<b>21</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>7941 ST. GREGORY DR. BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>SUSAN L. ECKERT</b>	Age	<b>19</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>7941 ST. GREGORY DR. BALTO.CO., MD.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

HUGH V. NASH

Name of Officiating Clergy or Authorized Officer

PASTOR, ZION UNITED CHURCH OF CHRIST

Title and Religious Denomination or Office

PO BOX 3615 BALTO, MD 21214

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45288

## Certificate of Marriage

State of Maryland

LICENSE NO.

130928

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21ST day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name DAMON TERRELL THOMASAge 18 Birthplace WASH., D.C.  
(State)

Groom's

Residence 537 CHATEAU AVENUEMarital Status SINGLE

Bride's

Name MARY JEANNETTE THORPEAge 32 Birthplace MARYLAND  
(State)

Bride's

Residence 537 CHATEAU AVENUEMarital Status SINGLERelationship to groom if any NONEREV. HARVEY R. SMITH

Name of Officiating Clergy or Authorized Officer

License Date DEC. 9 85PASTOR OF CHRISTIAN BAPTIST CHURCH

Title and Religious Denomination or Office

4303 PARK HEIGHTS AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45289

## Certificate of Marriage

State of Maryland

LICENSE NO.

130345

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 22nd day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>CLARENCE BATTLE</b>	Age	<b>51</b>	Birthplace	<b>N CAR</b>
				(State)	
Groom's Residence	<b>3226 GREENMEAD RD BALTO CO MD</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>EVELYN D HIPKINS</b>	Age	<b>44</b>	Birthplace	<b>N CAR</b>
				(State)	
Bride's Residence	<b>3226 GREENMEAD RD BALTO CO MD</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **NOV. 1,** 85**TALBERT GWYNN**Name of Officiating Clergy or Authorized Officer  
**ASSIST MINISTER CENTRAL CHURCH OF CHRIST**Title and Religious Denomination or Office  
**4374 PARKTON ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 55.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45290

## Certificate of Marriage

State of Maryland

LICENSE NO.

128989

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 22nd day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

RAYMOND J YANNUZZI JR

Age

27

Birthplace

MD

(State)

Groom's

Residence

7748 EASTDALE RD BALTO CO MD

Marital Status

SINGLE

Bride's

Name

LINDA M THOMPSON

Age

26

Birthplace

MD

(State)

Bride's

Residence

503 S LEHIGH ST

Marital Status

SINGLE

Relationship to groom if any

NONE

THOMAS E. DAVISON

Name of Officiating Clergyman or Authorized Officer

PASTOR LUTHER MEMORIAL CHURCH

Title and Religious Denomination or Office

5401 EASTERN AVE.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

License Fee

\$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45291

## Certificate of Marriage

State of Maryland

LICENSE NO.

128239

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 22 day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **GARY RAY HARRINGTON**Age **32** Birthplace **MD.**  
(State)Groom's  
Residence **631 DELAWARE AVENUE**Marital Status **SINGLE**Bride's  
Name **CAROLINE MARIE SMITH**Age **29** Birthplace **MD.**  
(State)Bride's  
Residence **505 S. EAST AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****REV. KIMBERLY MARK TEPHABOCK**

Name of Officiating Clergy or Authorized Officer

**PASTOR GOSPEL TEMPLE CHURCH OF GOD**License Date **JULY 26 85**

Title and Religious Denomination or Office

**4815 EASTERN AV.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45292

## Certificate of Marriage

State of Maryland

LICENSE NO.

130917

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	KAMAL I. SIRAGELDIN	Age	25	Birthplace	EGYPT (State)
Groom's Residence	1679 THETFORD RD. BALTO. CO., MD.	Marital Status	SINGLE		
Bride's Name	MARCIA L. TONDORA	Age	25	Birthplace	PA. (State)
Bride's Residence	518 VIRGINIA AVE. BALTO. CO., MD.	Marital Status	SINGLE		

Relationship to groom if any NONE

DAVID W. MALONE

Name of Officiating Clergy or Authorized Officer

PASTOR- BROWN MEMORIAL

Title and Religious Denomination or Office

1316 PARK AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985  
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45293

LICENSE NO.

130996

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 17th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	DONALD L. HARRIS, SR.	Age	30	Birthplace	MD.
				(State)	
Groom's Residence	2211 FLEETWOOD RD. APT. 2C	Marital Status	DIVORCED		
Bride's Name	DARCEL D. LEE	Age	26	Birthplace	MD.
				(State)	
Bride's Residence	2211 FLEETWOOD RD. APT. 2C	Marital Status	DIVORCED		
Relationship to groom if any	NONE				

NORRIS DICKERSON

Name of Officiating Clergy or Authorized Officer

MINISTER- BAPTIST

Title and Religious Denomination or Office

201 N. MONASTERY RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date

DEC 16 85

JW

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45294

## Certificate of Marriage

State of Maryland

LICENSE NO.

131018

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21ST day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

STEWART L MC CORMICK

Age 42Birthplace N.Y.

(State)

Groom's  
Residence

2103 N CHARLES ST

Marital Status

**DIVORCED**Bride's  
Name

MARY D MC CORMICK

Age 48Birthplace MD.

(State)

Bride's  
Residence

4320 CLEARWAY

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

REV. MARION JOSEPH HOBBS

Name of Officiating Clergy or Authorized Officer

PASTOR BAPTIST

Title and Religious Denomination or Office

4804 PLEASANT VIEW AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date **DEC. 13****85**License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45295

LICENSE NO.

131048

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21ST day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

RICHARD ALEXANDER TUCKER

Age 30

Birthplace

MD.

(State)

Groom's

Residence

121 W. SARATOGA ST.

Marital Status SINGLE

Bride's

Name

LONETTA DENISE MANNING

Age 27

Birthplace

MD.

(State)

Bride's

Residence

2021 N. PAYSON ST.

Marital Status SINGLE

Relationship to groom if any NONE

REV. TOMMIE L. JENKINS

Name of Officiating Clergy or Authorized Officer

License Date

DEC 16 85

MINISTER

Title and Religious Denomination or Office

1821 N. AISQUITH ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45296

## Certificate of Marriage

State of Maryland

LICENSE NO.

131115

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18 day of December 1985

the following persons were by me united in marriage at

Balto, md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DARTANYA R BOOZE

Age 37

Birthplace

MD.

(State)

Groom's  
Residence

2279 REISTERSTOWN RD

Marital Status

SINGLE

Bride's  
Name

JANIE L WASHINGTON

Age 26

Birthplace

MD.

(State)

Bride's  
Residence

610 N AUGUSTA AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

Rev. Rodney D. Sewell  
Name of Officiating Clergy or Authorized OfficerPastor  
Title and Religious Denomination or Office313 S. Augusta Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

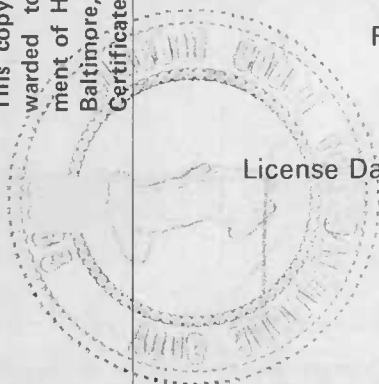
office on

SAUNDRA E. BANKS, CLERK  
Signature — Clerk of the Court

DEC 20 1985

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45297

## Certificate of Marriage

State of Maryland

LICENSE NO.

130916

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>DARRYL E HESS</b>	Age	<b>21</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>6100 MARIETTA AVE</b>	Marital Status		<b>SINGLE</b>	
Bride's Name	<b>LAURA L MC DERMOTT</b>	Age	<b>21</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>7610 OLD HARFORD RD BALTO CO MD</b>	Marital Status		<b>SINGLE</b>	
Relationship to groom if any		<b>NONE</b>			

EDGAR T. HUTTON

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6 85**MINISTER, NORTHSIDE BAPTIST CHURCH

Title and Religious Denomination or Office

400 E. NORTHREN PARKWAY.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 20 1985 DEC 20 1985**License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45298

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130858

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)***I Hereby Certify* that on the 14th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LARRY LEE LAWSON**Age **31** Birthplace **MD.**  
(State)Groom's Residence **1758 E. NORTH AVENUE**Marital Status **SINGLE**Bride's Name **NOREEN BONITTA WRIGHT**Age **23** Birthplace **WASH., D.C.**  
(State)Bride's Residence **1804 RAYNOR AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****GILBERT H. EDWARDS**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 3 85****PASTOR P.C.A.F**

Title and Religious Denomination or Office

**908 MCKEWIN AV.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 20 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**  
Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45299

## Certificate of Marriage

State of Maryland

LICENSE NO.

130772

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT D. STEARNS**Age **35** Birthplace **MD.**  
(State)Groom's Residence **2100 WESTFIELD AVE.**Marital Status **DIVORCED**Bride's Name **SUSAN C. STOKES**Age **35** Birthplace **MD.**  
(State)Bride's Residence **2100 WESTFIELD AVE.**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **DEC. 5, 85****EUGENE P. BARTELL**

Name of Officiating Clergy or Authorized Officer

**MINISTER UNITED CHURCH OF CHRIST**

Title and Religious Denomination or Office

**1728 EASTEN AV. BALTO., MD 21231**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

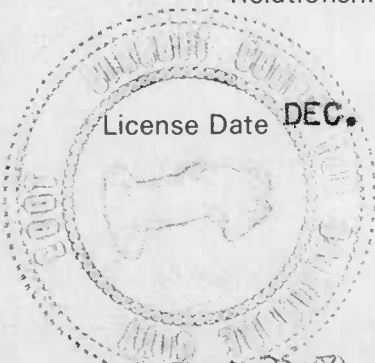
office on

**DEC 20 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

## Certificate of Marriage

85-45300

State of Maryland

LICENSE NO.  
129217

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 14th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DWAYNE E RACHHAUS

Age

24

Birthplace

MD.

(State)

Groom's  
Residence

133 B WARWICKSHIRE LA A.A.CO.MD.

Marital Status

SINGLE

Bride's  
Name

THERESA M SAWYER

Age

21

Birthplace

MD.

(State)

Bride's  
Residence

133 B WARWICKSHIRE LA A.A.CO.MD

Marital Status

SINGLE

Relationship to groom if any

NONE

MICHAEL ROACH

Name of Officiating Clergyman or Authorized Officer

PRIEST- ROMAN CATHOLIC

Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 20 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee

\$25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

License Date SEPT. 11 85

2

85-45301

## Certificate of Marriage

State of Maryland

LICENSE NO.

130877

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 4th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES E. COLEMAN, JR.** Age **20** Birthplace **MD.**  
(State)

Groom's Residence **1931 N. PATTERSON PARK AVENUE** Marital Status **SINGLE**

Bride's Name **SHARON D. FIELDS** Age **19** Birthplace **MD.**  
(State)

Bride's Residence **2018 BARCLAY STREET** Marital Status **SINGLE**

Relationship to groom if any **NONE****BERNICE WARREN**

Name of Officiating Clergy or Authorized Officer

**PASTOR- PRESBYTERIAN CHURCH U S A**

Title and Religious Denomination or Office

**1311 REED PLACE CHESTER, PA.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 16 1985****SANDRA E. DANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.50

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45302

## Certificate of Marriage

State of Maryland

LICENSE NO.

130897

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14<sup>th</sup> day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DONALD R CARTER**Age **43** Birthplace **PA.**  
(State)Groom's Residence **3402 RIPPLE RD BALTO CO MD**Marital Status **DIVORCED**Bride's Name **MABEL R CRAFT**Age **38** Birthplace **MD.**  
(State)Bride's Residence **1667 FREEDOM WAY NORTH**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOSEPH P. STEWART**

Name of Officiating Clergy or Authorized Officer

85

**PASTOR- NEW LEBANON CALVARY BAPT.**

Title and Religious Denomination or Office

**3756 DOLFIELD AVE.**

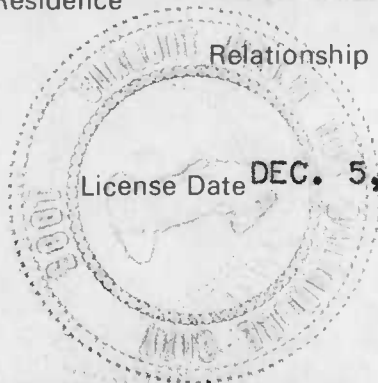
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 16 1985License Fee \$ 25.00Signature — Clerk of the Court **DAVID E. BAILEY, CLERK**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45303

## Certificate of Marriage

State of Maryland

LICENSE NO.

130922

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 12th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**JAMES BARRETT MAGINNIS, JR**Age **31**

Birthplace

**MD.**  
(State)Groom's  
Residence**3022 OAK GREEN CT. HOWARD. CO., MD**Marital Status **SINGLE**Bride's  
Name**MARY MACGREGOR GEIS**Age **30**

Birthplace

**MD.**  
(State)Bride's  
Residence**806 WINANS WAY.**Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date

**DEC 10 85****JW****ALFRED B. STARRATT**

Name of Officiating Clergy or Authorized Officer

**RECTOR EMERITUS- EMMANUEL CHURCH**

Title and Religious Denomination or Office

**811 CATHEDRAL ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45304

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130948

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)***I Hereby Certify* that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FINN OLAF SORTEBERG** Age **20** Birthplace **MD.**  
(State)

Groom's Residence **2407 CIDER MILL RD. BALTO.CO., MD** Marital Status **SINGLE**

Bride's Name **KARENE NAOMI CONNOLLY** Age **18** Birthplace **MD.**  
(State)

Bride's Residence **3016 GLENMORE AV.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

WILLIAM E. POLK, JR.

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 9** **85**PASTOR- BETHESDA UNITED METH. CHURCH

Title and Religious Denomination or Office

6300 HARFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 16 1985License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45305

## Certificate of Marriage

State of Maryland

LICENSE NO.

130982

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 13th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

8:56

Groom's

Name CLINTON CHARLES REQUER, 3RD. Age 22 Birthplace MD.  
(State)

Groom's

Residence 1510 W. FAYETTE STREET Marital Status SINGLE

Bride's

Name LAVINIA EARLINE JENKINS Age 31 Birthplace MD.  
(State)

Bride's

Residence 1510 W. FAYETTE STREET Marital Status DIVORCEDRelationship to groom if any NONEERA S. FERRELL

Name of Officiating Clergy or Authorized Officer

ASSOCIATE MIN. - EMMANUEL C C CHURCH

Title and Religious Denomination or Office

1530 W. LEXINGTON ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 16 1985  
SAUNDRA L. BARKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45306

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130988

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	EDWARD D. SANDERS	Age	45	Birthplace	TX.
					(State)
Groom's Residence	123 N. DENISON ST.	Marital Status	DIVORCED		
Bride's Name	IDA M. LEWIS	Age	51	Birthplace	VA.
					(State)
Bride's Residence	123 N. DENISON ST.	Marital Status	SINGLE		

Relationship to groom if any NONEWILBUR J. HUBBARD

Name of Officiating Clergy or Authorized Officer

PASTOR BAPTIST

Title and Religious Denomination or Office

684 MC KEE AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 16 1985

SAUNDRA E. BANKS, CLERK  
Clerk of the CourtLicense Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45307

## State of Maryland

 LICENSE NO.  
131010

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 14th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CLARENCE VERNON ROBERSON, JR**

Age **32** Birthplace **CA.**  
(State)

Groom's Residence **2511 IVERSON ST. P.G.CO., MD**

Marital Status **SINGLE**

Bride's Name **BAITH LINDA ALTON**

Age **29** Birthplace **MD.**  
(State)

Bride's Residence **2511 IVERSON ST. P.G.CO., MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**HOWARD E. NICHOLS**

Name of Officiating Clergy or Authorized Officer

**PASTOR- WAYMAN MEM. A.M.E. CHURCH**

Title and Religious Denomination or Office

**8 EAST STREET ANNAPOLIS, MD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 16 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45308

## State of Maryland

LICENSE NO.

131027

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 13th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PRESTON C. HILL JR**

Age **29** Birthplace **MD.**  
(State)

Groom's Residence **1863 FREEDOM WAY NORTH.**

Marital Status **SINGLE**

Bride's Name **YVONNE B. COLEMAN**

Age **40** Birthplace **MD.**  
(State)

Bride's Residence **1863 FREEDOM WAY NORTH.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**H. MARIE ROBINSON**

Name of Officiating Clergy or Authorized Officer

License Date

**DEC 13 85**

**PASTOR- BAPTIST**

Title and Religious Denomination or Office

**517 GWYNVALE RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 16 1985**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45309

State of Maryland

LICENSE NO.

128788

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 5th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DAVID LEWIS BREWER  
 Groom's Residence 1123 GORSUCH AVENUE  
 Bride's Name TIFFANY GAY COOK  
 Bride's Residence 3039 ST. PAUL STREET

Age 25 Birthplace MD.  
 (State)  
 Marital Status SINGLE  
 Age 14 Birthplace MD.  
 (State)  
 Marital Status SINGLE

Relationship to groom if any NONE

License Date AUG 19 85

JW

REV. JAMES D. LINTHICUM

Name of Officiating Clergyman or Authorized Officer

PASTOR THE UNITED METHODIST CHURCH

Title and Religious Denomination or Office

3700 ELKADER RD.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 31 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee

\$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45310

LICENSE NO.

130656

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DAVID R. DUVALL

Age 38 Birthplace MD.  
(State)

Groom's Residence 2217 E. FAIRMOUNT AVE.

Marital Status DIVORCED

Bride's Name MARIA T. GORALSKI

Age 32 Birthplace MD.  
(State)

Bride's Residence 2217 E. FAIRMOUNT AVE.

Marital Status SINGLE

Relationship to groom if any NONE

EDWARD H. PEPPLER

Name of Officiating Clergy or Authorized Officer

PASTOR NATION LUTHERAN CHURCH

Title and Religious Denomination or Office

14 RATNA CT.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 31 1985  
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date NOV. 21 85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45311

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130900

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name TIMOTHY FRANCIS MADGARAge 29 Birthplace MD.  
(State)Groom's  
Residence 3103 ORLANDO AV.Marital Status SINGLEBride's  
Name MARGARET LISA LA GUARDIAAge 30 Birthplace MD.  
(State)Bride's  
Residence 7019 LACHLANT CIR. BALTO. CO., MDMarital Status SINGLERelationship to groom if any NONEALLEN NOVOTNY, S. R.

Name of Officiating Clergy or Authorized Officer

License Date DEC. 5 85ROMAN CATHOLIC

Title and Religious Denomination or Office

LOYOLA COLLEGE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 31 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45312

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130914

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21<sup>st</sup> day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name DONALD P. PRESTON Age 28 Birthplace MD.  
(State)Groom's  
Residence 2526 WINDSOR RD. BALTO. CO., MD. Marital Status SINGLEBride's  
Name KAREN J. EUTSLER Age 26 Birthplace MD.  
(State)Bride's  
Residence 2516 HILLCREST AVE. BALTO. CO., MD. Marital Status SINGLERelationship to groom if any NONEDAVID J. WECHT

Name of Officiating Clergy or Authorized Officer

ORDAINED MINSTER THE AMERICAN LUTHERAN CHURCH

Title and Religious Denomination or Office

9221 BELLBECK RD. 21234

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

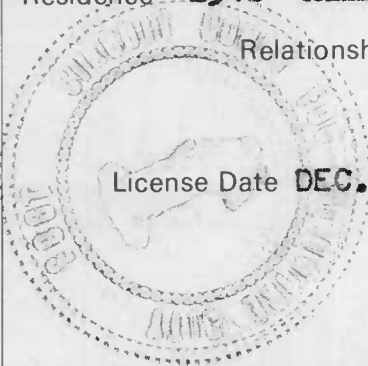
office on

DEC 31 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



85-45313

## Certificate of Marriage

State of Maryland

LICENSE NO.

130793

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7<sup>th</sup> day of Dec. 19 85

the following persons were by me united in marriage at

Baltimore Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **EUGENE HARRISON GREENE**Age **32**

Birthplace

**MD.**

(State)

Groom's

Residence **4107 BELVIEU AVENUE**

Marital Status

**SINGLE**

Bride's

Name **KAREN ELISE BRODIE**Age **24**

Birthplace

**MD.**

(State)

Bride's

Residence **4107 BELVIEU AVENUE**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

License Date

**NOV. 27****85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-16-85

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45314

## Certificate of Marriage

State of Maryland

LICENSE NO.

130738

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14<sup>th</sup> day of Dec. 19 85

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THOMAS M. MURPHY** Age **26** Birthplace **MD.**  
(State)

Groom's Residence **6 E. REVERE CT. BALTO.CO., MD.** Marital Status **SINGLE**

Bride's Name **TERRI A. URBANIK** Age **24** Birthplace **PA.**  
(State)

Bride's Residence **541 ALLEGHENY AVE. BALTO.CO., MD.** Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **NOV. 29 85**

Name of Officiating Clergy or Authorized Officer

Catholic Priest  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

5400 Roland Ave.

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-16-85

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45315

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130658

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14<sup>th</sup> day of Dec 19 85

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	TIMOTHY L. GREEN	Age	20	Birthplace	MD.
				(State)	
Groom's Residence	306 WASHBURN AVE.	Marital Status	SINGLE		
Bride's Name	TAMMY S. DE LAWDER	Age	21	Birthplace	MD.
				(State)	
Bride's Residence	114 SUNSET DR. A.A. CO., MD.	Marital Status	SINGLE		

Relationship to groom if any NONELicense Date NOV. 29, 85Henry C. Milpowski  
Name of Officiating Clergy or Authorized OfficerMinister  
Title and Religious Denomination or OfficeBalt. Md.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

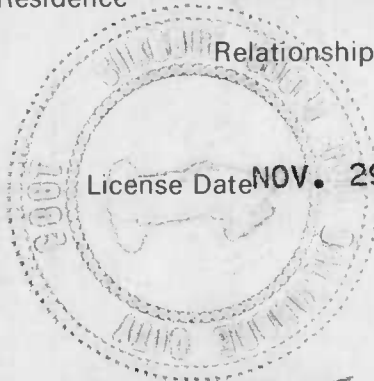
12-16-85**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





85-45316

## Certificate of Marriage

State of Maryland

LICENSE NO.

130516

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 10 day of Dec. 1985the following persons were by me united in marriage at Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT EUGENE EMERSON**Age **40** Birthplace **VA.**  
(State)Groom's Residence **1602 S. MARSHALL STREET**Marital Status **DIVORCED**Bride's Name **JANICE LYNN HUMPHREY**Age **38** Birthplace **MD.**  
(State)Bride's Residence **3637 E. FAYETTE STREET**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **NOV. 19 85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45317

## Certificate of Marriage

State of Maryland

LICENSE NO.

130460

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8<sup>th</sup> day of Dec. 1985

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ROBERT E BINNS

Age 41Birthplace MD.Groom's  
Residence

138 S LOUDON AVE

Marital Status

(State)  
**DIVORCED**Bride's  
Name

BRENDA K HOWELL

Age 31Birthplace N CARBride's  
Residence

138 S LOUDON AVE

Marital Status

(State)  
**SINGLE****NONE**

Relationship to groom if any

License Date **NOV. 14 85**

Name of Officiating Clergy or Authorized Officer

Baptist Minister  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

3608 Pentwater Av.

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-16-85  
**SAUNDRA E. BARKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45318

## Certificate of Marriage

State of Maryland

LICENSE NO.

130368

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7<sup>th</sup> day of Dec. 1985the following persons were by me united in marriage at Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JAMES SAUNDERS JR

Age 55

Birthplace VA

(State)

Groom's  
Residence

5424 PRICE AVE

Marital Status

DIVORCED

Bride's  
Name

MARGARET G JAMISON

Age 41

Birthplace N CAR

(State)

Bride's  
Residence

5424 PRICE AVE

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date NOV. 6 85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45319

LICENSE NO.

130366

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 6<sup>th</sup> day of Dec. 19 85

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name L'AARON DESHIELD ODUM

Age 19 Birthplace MD  
(State)

Groom's

Residence 4912 CARMINE AV.

Marital Status SINGLE

Bride's

Name KIMBERLY SHAUNNA YVETTE FERRELL

Age 26 Birthplace MD.  
(State)

Bride's

Residence 4912 CARMINE AV.

Marital Status SINGLE

Relationship to groom if any

NONE

License Date NOV. 26 85

TT

Doreen Turner  
Name of Officiating Clergy or Authorized Officer

Minister  
Title and Religious Denomination or Office

2929 Dupont Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-16-85

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45320

## Certificate of Marriage

State of Maryland

LICENSE NO.

130336

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8<sup>th</sup> day of Dec. 1985

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

STEVEN JAY SUMMER

Age

36

Birthplace

R.I.

(State)

Groom's

Residence

18 MIDDLEVIEW CT. BALTO. CO., MD.

Marital Status

SINGLE

Bride's

Name

LORAIN SON

Age

32

Birthplace

PA.

(State)

Bride's

Residence

6603 COPPER RIDGE DR. BALTO. CO., MD.

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date NOV. 12 85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 35.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

2

85-45321

## Certificate of Marriage

State of Maryland

LICENSE NO.

130841

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>WILLIAM W. WLADKOWSKI</b>	Age	<b>24</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>3402 KENTUCKY AVE.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>KAREN S. FLENNER</b>	Age	<b>24</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>4124 MARX AVE.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE****DAVID LEARY**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 2 85** **ASSOC. PASTOR- SHRINE OF THE LITTLE FLOWER**

Title and Religious Denomination or Office

**2854 BRENDAN AVENUE**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 16 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45322

LICENSE NO.

130848

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 8th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DANNY D. MC COY

Age 38 Birthplace MD.  
(State)

Groom's Residence 1014 COOKS LANE

Marital Status DIVORCED

Bride's Name VLASTA M. CURTIS

Age 29 Birthplace MD.  
(State)

Bride's Residence 2934 ROSLYN AVENUE

Marital Status DIVORCED

Relationship to groom if any NONE

LLOYD E. MARCUS

Name of Officiating Clergy or Authorized Officer

License Date DEC. 2 85

PASTOR- MT WINANS UNITED METH. CHURCH

Title and Religious Denomination or Office

6019 BELLE GROVE RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 16 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45323

LICENSE NO.  
130860

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 14th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RONALD J. RUPERT**

Age **35** Birthplace **MD.**  
(State)

Groom's Residence **101-D ASPINWOOD WAY BALTO. CO., MD.** Marital Status **DIVORCED**

Bride's Name **GAIL A. CIOTOLA**

Age **24** Birthplace **MD.**  
(State)

Bride's Residence **101-D ASPINWOOD WAY BALTO. CO., MD.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

**KENNETH P. MAC DONALD, JR.**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 5**

**85 PASTOR- OVERLEA UNITED METH. CHURCH**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 16 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45324

## Certificate of Marriage

State of Maryland

LICENSE NO.

129812

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14<sup>th</sup> day of December 19 85the following persons were by me united in marriage at Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **JOHN KACZYNSKI**Age **45** Birthplace **MD.**  
(State)Groom's  
Residence **3323 MCSHANE WAY. BALTI. CO., MD**Marital Status **DIVORCED**Bride's  
Name **DEBRA S. ARMENTROUT**Age **32** Birthplace **W. VA.**  
(State)Bride's  
Residence **3323 MCSHANE WAY. BALTO. CO., MD**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **NOV. 21** **85**

Name of Officiating Clergy or Authorized Officer

The Rev. E. Owen Grooms -  
Pastor - Holy Cross M.C. Church

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

208 S. Broadway Balto, Md. 21231

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45325

LICENSE NO.

130665

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21<sup>st</sup> day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DAVID THOMAS KING Age 30 Birthplace MD.  
(State)

Groom's Residence 4046 MC DOWELL LANE BALTO.CO., MD. Marital Status SINGLE

Bride's Name STARLET DAWN KETNOR Age 23 Birthplace MD.  
(State)

Bride's Residence 4046 MC DOWELL LANE BALTO.CO., MD. Marital Status DIVORCED

Relationship to groom if any NONE

DALLAS LANDRUM

Name of Officiating Clergy or Authorized Officer

License Date NOV 25 1985 MINISTER PRESQUITTIAN CHURCH

Title and Religious Denomination or Office

10307 CRIMSON TREE CT. COLUMBIA, MD  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 26 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45326

## Certificate of Marriage

State of Maryland

LICENSE NO.

131192

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CHARLES A STEPHENS

Age

55

Birthplace

TENN

(State)

Groom's  
Residence

5209 GOODNOW RD

Marital Status

SINGLE

Bride's  
Name

VELMA R BLOUNT

Age

27

Birthplace

N CAR

(State)

Bride's  
Residence

5209 GOODNOW RD

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date **DEC. 23** **85**

REV. ERNEST J. STONE, SR

Name of Officiating Clergy or Authorized Officer

PENTECOSTAL ERANGELINCAL CHURCH

Title and Religious Denomination or Office

3967 SINCLAIR LN.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 26 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45327

## Certificate of Marriage

State of Maryland

LICENSE NO.

131120

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21nd day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CHARLES LUCIUS MAURA

Age 49

Birthplace

FLA.  
(State)Groom's  
Residence

8417 LUCERNE RD. BALTO.CO.,MD

Marital Status

DIVORCEDBride's  
Name

DEBORAH J. MONDEH

Age 36

Birthplace

MD.  
(State)Bride's  
Residence

8417 LUCERNE RD. BALTO.CO.,MD

Marital Status

DIVORCEDRelationship to groom if any NONE

REV. DR. HENRY SIMON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 19 85BAPTIST

Title and Religious Denomination or Office

823 CHERRY HILL RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 26 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

tt

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45328

LICENSE NO.  
131066

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21<sup>st</sup> day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	ARTHUR I WAGONER	Age	20	Birthplace	MD.
Groom's Residence	1128 FOXWOOD LA BALTO CO MD	Marital Status	SINGLE		
Bride's Name	ANNA M COOK	Age	22	Birthplace	MD.
Bride's Residence	412 N ROBINSON ST	Marital Status	SINGLE		
Relationship to groom if any	NONE				

CHARLES P. MARSHALL

Name of Officiating Clergy or Authorized Officer

License Date Dec. 16, 85

PASTOR, EMMANUEL LUTHERAN CHURCH

Title and Religious Denomination or Office

3131 E. BALTIMORE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

**DEC 26 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45329

## Certificate of Marriage

State of Maryland

LICENSE NO.

131026

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CHARLES H BURRIER

Age 66

Birthplace

MD.

(State)

Groom's  
Residence

10 GLENAMOY RD BALTO CO MD

Marital Status

DIVORCED

Bride's  
Name

DELORES M COLLINS

Age 53

Birthplace

MD.

(State)

Bride's  
Residence

10 GLENAMOY RD BALTO CO MD

Marital Status

DIVORCED

Relationship to groom if any

NONE

REV. ROY A. MAACK

Name of Officiating Clergy or Authorized Officer

License Date

DEC 16

85

PASTOR CALVARY LUTHERAN

Title and Religious Denomination or Office

JW

6619 BIRCHWOOD AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 26 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45330

## State of Maryland

LICENSE NO.

131007

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23rd day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	CHARLES STEPHENS	Age	41	Birthplace	MD.
				(State)	
Groom's Residence	5526 GWYNN OAK AVE.	Marital Status	DIVORCED		
Bride's Name	BRENDA SYKES	Age	37	Birthplace	MD.
				(State)	
Bride's Residence	5526 GWYNN OAK AVE.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

REV. BERNARD JAMES BOYD

Name of Officiating Clergy or Authorized Officer

License Date DEC. 13 85

PASTER TEMPLE BAPTIST CHURCH

Title and Religious Denomination or Office

3012 WINDSOR AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 26 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45331

LICENSE NO.

131005

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

*I Hereby Certify* that on the 14th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FLOYD EDWARDS**

Age **36** Birthplace **N. CAR.**  
(State)

Groom's Residence **5314 BEAUFORT AVE.**

Marital Status **SINGLE**

Bride's Name **SUSIE P. WICKS**

Age **37** Birthplace **VA.**  
(State)

Bride's Residence **5314 BEAUFORT AVE.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**REV. DR. JIMMIE ROBINSON, JR**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 13 85**

**PASTOR, THE SALEM BAPTIST CHURCH**

Title and Religious Denomination or Office

tt

**1643 PENTWOOD RD. BALTO, MD**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 26 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45332

## Certificate of Marriage

State of Maryland

LICENSE NO.

130981

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name TERRY L. COHEN Age 32 Birthplace MD.  
(State)Groom's Residence 804 IVY LEAGUE LA., MONT. CO., MD. Marital Status SINGLEBride's Name MARCIE L. CYNAMON Age 31 Birthplace FLA.  
(State)Bride's Residence 804 IVY LEAGUE LA., MONT. CO., MD. Marital Status SINGLERelationship to groom if any NONEDONALD R. BERLIN, RABBI

Name of Officiating Clergy or Authorized Officer

RABBI TEMPLE OMEB SHALOM

Title and Religious Denomination or Office

7310 PARK HEIGHTS AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 26 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date DEC. 17, 85License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45333

LICENSE NO.

130989

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21 st day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

PHILLIP B GLADDEN

Age 23

Birthplace MD.  
(State)

Groom's  
Residence

3024 SEAMON AVE

Marital Status

SINGLE

Bride's  
Name

LONARELL A BROWN

Age 25

Birthplace MD.  
(State)

Bride's  
Residence

3024 SEAMON AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date DEC 12 85

JW

E.A. JONES

Name of Officiating Clergy or Authorized Officer

3340 W. BELVEDERE AVE.

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45334

## Certificate of Marriage

State of Maryland

LICENSE NO.

130999

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **THEODORE BRYAN PARKER**Age **20** Birthplace **MD.**  
(State)Groom's Residence **4918 CHALLEDON ROAD**Marital Status **SINGLE**Bride's Name **CECILIA MARIETTA RICHARDSON**Age **19** Birthplace **MD.**  
(State)Bride's Residence **4918 CHALLEDON ROAD**Marital Status **SINGLE**Relationship to groom if any **NONE****BRIAN M. COX**

Name of Officiating Clergy or Authorized Officer

**PRIEST- CATHOLIC**

Title and Religious Denomination or Office

**ST. JOHN, BOX 546 WESTMINSTER, MD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **DEC. 12, 85**License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45335

## Certificate of Marriage

State of Maryland

LICENSE NO.

131159

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21 day of Dec. 1985

the following persons were by me united in marriage at

Balto, md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOHN PAYLOR ,JR.

Age 31

Birthplace

MD.

(State)

Groom's  
Residence

2930 SEQUOIA AVE

Marital Status

SINGLE

Bride's  
Name

LORETTA EDWARDS

Age 39

Birthplace

MD.

(State)

Bride's  
Residence

2916 POPLAR TERR

Marital Status

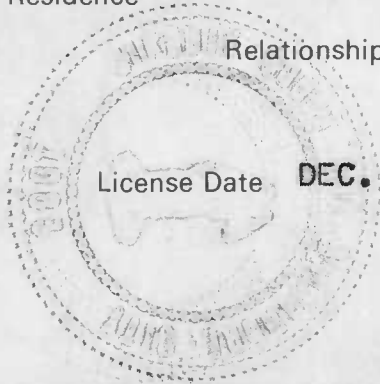
DIVORCED

Relationship to groom if any

NONE

License Date

DEC. 20, 85

Rev. James B. Gray, Jr.  
Name of Officiating Clergy or Authorized OfficerPastor  
Title and Religious Denomination or Office5308 Haddon Ave.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

License Fee \$

25 00

SANDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45336

## Certificate of Marriage

State of Maryland

LICENSE NO.

131142

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23 day of Dec. 1985

the following persons were by me united in marriage at

Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CORNELIUS GAINES

Age 38

Birthplace

MD.  
(State)Groom's  
Residence

812 PAYSON STREET

Marital Status DIVORCEDBride's  
Name

DEBORAH DIANE CRAIG

Age 35

Birthplace

MD.  
(State)

Bride's

Residence

1502 PENNSYLVANIA AVENUE

Marital Status DIVORCED

Relationship to groom if any

NONERev. Heber M. Brown

Name of Officiating Clergy or Authorized Officer

Pastor

Title and Religious Denomination or Office

502 Cathedral St.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

License Fee \$

25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45337

## Certificate of Marriage

State of Maryland

LICENSE NO.

131141

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20 day of Dec. 1985

the following persons were by me united in marriage at

Balto., Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ROBERT F PLATO

Age 51

Birthplace

MD.

(State)

Groom's  
Residence

1505 PENTRIDGE RD

Marital Status

DIVORCED

Bride's  
Name

CARRIE M HOWARD

Age 34

Birthplace

MD.

(State)

Bride's  
Residence

2530 N EDGECOMB CIRCLE

Marital Status

DIVORCED

Relationship to groom if any

NONE

Rev. Marshall H. Strickland

Name of Officiating Clergy or Authorized Officer

License Date DEC. 1985Minister

Title and Religious Denomination or Office

1128 Penna. Ave.

Address of Clergy or Authorized Officer

tt

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45338

## Certificate of Marriage

State of Maryland

LICENSE NO.

131126

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 22 day of Dec. 1985

the following persons were by me united in marriage at

Balto. md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **MICHAEL FRANK KNIGHT**Age **19**

Birthplace

**WISCONSIN**  
(State)

Groom's

Residence **2902 W. STRATHMORE AV.**

Marital Status

**SINGLE**

Bride's

Name **EDITH AVEN LAWSON**Age **17**

Birthplace

**MD.**  
(State)

Bride's

Residence **606 WYANOKE AV.**

Marital Status

**SINGLE**Relationship to groom if any **NONE**Rev. Angus G. Smith  
Name of Officiating Clergy or Authorized OfficerLicense Date **DEC 19 85**Methodist  
Title and Religious Denomination or Office1839 N. Regester St.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the foregoing is a true copy of a record filed in this

office on

**DEC 24 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45339

## Certificate of Marriage

State of Maryland

LICENSE NO.

131117

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 22 day of Dec. 1985

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ROY DOUGLASS COOK, JR.

Age 31

Birthplace MD.  
(State)Groom's  
Residence

5304 HADDON AVENUE

Marital Status SINGLE

Bride's  
Name

BEVERLY ANN WARD

Age 37

Birthplace PA.  
(State)Bride's  
Residence

5304 HADDON AVENUE

Marital Status DIVORCED

Relationship to groom if any

NONE

License Date DEC. 19

85

Name of Officiating Clergy or Authorized Officer

Rev. Richard Grimes, Jr.

Title and Religious Denomination or Office

Asst. Pastor

Address of Clergy or Authorized Officer

4303 Park Height Ave.

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45340

## Certificate of Marriage

State of Maryland

LICENSE NO.

131116

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21 day of Dec. 1985

the following persons were by me united in marriage at

Balto. md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

KEITH D CHESLEY

Age

27

Birthplace

MD.

(State)

Groom's  
Residence

1315 PRESSTMAN ST

Marital Status

SINGLE

Bride's  
Name

DONNA J TISDALE

Age

24

Birthplace

MD.

(State)

Bride's  
Residence

336 E LORRAINE AVE

Marital Status

SINGLE

NONE

Relationship to groom if any

Rev. Theodore R. Pitts

Name of Officiating Clergy or Authorized Officer

Pastor

Title and Religious Denomination or Office

2709 Ellendale Rd.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

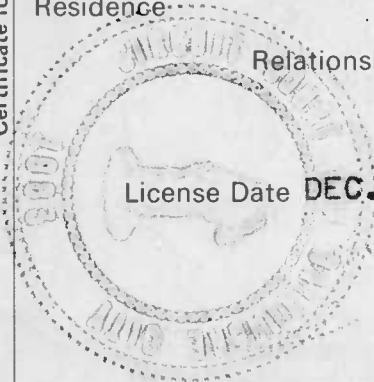
DEC 24 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45341

LICENSE NO.

131111

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22nd day of DECEMBER 19 85

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**CARLTON BRYANT PARKER**

Age **33** Birthplace **MD.**  
(State)

Groom's

Residence **3222 MASSACHUSETTS AV.**

Marital Status **SINGLE**

Bride's

Name **JOYCE ROBERTA MACK**

Age **23** Birthplace **MD.**  
(State)

Bride's

Residence **1623 W. LEXINGTON ST.**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**ELYAH SHAW**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 20 85**

**ELDER**

Title and Religious Denomination or Office

**1626 W LEXINGTON ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45342

## Certificate of Marriage

State of Maryland

LICENSE NO.

131103

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21<sup>st</sup> day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	HASCO LOGAN	Age	18	Birthplace	FLA
Groom's Residence	2721 BOOKERT DR	Marital Status	(State) SINGLE		
Bride's Name	NADINE H DOTSON	Age	18	Birthplace	MD.
Bride's Residence	286 THOMPSON AVE A.A.CO.MD.	Marital Status	(State) SINGLE		
Relationship to groom if any	NONE				

THOMAS E. BETHEA

Name of Officiating Clergy or Authorized Officer

License Date DEC. 18, 85

ELDER JEHOVAH WITNESS

Title and Religious Denomination or Office

740 REEDBIRD AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45343

LICENSE NO.

131099

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21st day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DALE C. VOUGHT

Age 31

Birthplace

MD.

(State)

Groom's  
Residence

3633 BUENA VISTA AVE

Marital Status

DIVORCED

Bride's  
Name

DEBORAH L SNAIR

Age 30

Birthplace

MD.

(State)

Bride's  
Residence

3633 BUENA VISTA AVE

Marital Status

DIVORCED

NONE

Relationship to groom if any

DAVID W. RIMBACH

Name of Officiating Clergy or Authorized Officer

License Date DEC. 18,

85

MINISTER HAMPDEN UNITED METHODIST CHURCH

Title and Religious Denomination or Office

3449 FALLS RD. BALTO, MD 21211

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

License Fee \$ 25.00

DAVIDA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45344

## Certificate of Marriage

State of Maryland

LICENSE NO.

131085

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	VINCENT EDWARD DELANEY	Age	21	Birthplace	MD.
				(State)	
Groom's Residence	3533 LUCILLE AV.	Marital Status	SINGLE		
Bride's Name	PATRICIA LUCILLE FUNDERBURK	Age	26	Birthplace	MD.
				(State)	
Bride's Residence	3533 LUCILLE AV.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

REV. AGNES M. ALSTON

Name of Officiating Clergy or Authorized Officer

License Date DEC.18 85

ASSOC. MINISTER-GILLIS C.C. CHURCH

Title and Religious Denomination of Office

1705 WESWOOD AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this office on DEC 24 1985License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45345

# Certificate of Marriage

State of Maryland

LICENSE NO.

131059

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21st day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name WILLIAM FRANKLIN ASHBY, JR. Age 21 Birthplace MD.  
(State)

Groom's Residence 299-C SNOWCAP CT. GLEN BURNIE, MD. Marital Status SINGLE

Bride's Name JULIA LYNN NEUMEISTER Age 19 Birthplace MD.  
(State)

Bride's Residence 299-C SNOWCAP CT. GLEN BURNIE, MD. Marital Status SINGLE

Relationship to groom if any NONE

REV. JOSEPH P. LETTRICH

Name of Officiating Clergy or Authorized Officer

License Date

DEC 20

85

PASTOR OF ST JOHN

Title and Religious Denomination or Office

GLEN BURNIE MD 21061

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

License Fee \$ 25.00

SANDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45346

LICENSE NO.

131049

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20<sup>th</sup> day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DANA M WARD

Age 23

Birthplace

MD.

(State)

Groom's  
Residence

2546 DRUID PK DR

Marital Status

SINGLE

Bride's  
Name

TERESA A WHITT

Age 22

Birthplace

N Y

(State)

Bride's  
Residence

2546 DRUID PK DR

Marital Status

SINGLE

Relationship to groom, if any

NONE

REV. HOWARD R. GREEN D.D.

Name of Officiating Clergy or Authorized Officer

License Date

DEC 20 85

PASTOR, PLEASANT HOPE BAPTIST CHURCH

Title and Religious Denomination or Office

3719 MORTONIA RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00

DEC 24 1985  
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45347

## Certificate of Marriage

State of Maryland

LICENSE NO.

131039

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21<sup>st</sup> day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<u>HAROLD A. NORTON, JR.</u>	Age	<u>47</u>	Birthplace	<u>MD.</u>
				(State)	
Groom's Residence	<u>2428 LAURETTA AVE.</u>	Marital Status	<u>DIVORCED</u>		
Bride's Name	<u>MADELINE S. GITTINGS</u>	Age	<u>40</u>	Birthplace	<u>MD.</u>
				(State)	
Bride's Residence	<u>2428 LAURETTA AVE.</u>	Marital Status	<u>DIVORCED</u>		
Relationship to groom if any	<u>NONE</u>				

License Date DEC. 16 85REV. ROBERT L. HAYNES

Name of Officiating Clergy or Authorized Officer

BAPTIST MINISTER

Title and Religious Denomination or Office

51-11 GREENWICH AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45348

## Certificate of Marriage

State of Maryland

LICENSE NO.

130978

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **DAVID ALLAN GORDON**Age **32** Birthplace **PA.**  
(State)Groom's  
Residence **CHARLESMONT ROAD**Marital Status **SINGLE**Bride's  
Name **TRUDY ANN NAWROCKI**Age **27** Birthplace **MD.**  
(State)Bride's  
Residence **7811 CHARLESMONT ROAD**Marital Status **DIVORCED**Relationship to groom if any **NONE****ERNEST R. D. SMART**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 11 85****PASTOR AT SECON PRESBYTERIAN CHURCH**

Title and Religious Denomination or Office

**2 STRATFORD RD**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**DEC 24 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45349

## Certificate of Marriage

State of Maryland

LICENSE NO.

130868

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **JAMES J. MORENCY**Age **47** Birthplace **CONN.**  
(State)Groom's  
Residence **61 GLEN RIDGE RD. A.A.CO., MD**Marital Status **DIVORCED**Bride's  
Name **ANN S. GARNER**Age **43** Birthplace **MD.**  
(State)Bride's  
Residence **506 E. CLEMENT STREET.**Marital Status **DIVORCED**Relationship to groom if any **NONE****JAMES E. SWECKER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 5 85****MINISTER- UNITED METH. CHURCH**

Title and Religious Denomination or Office

**JW****1500 PATAPSCO ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**DEC 16 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45350

## Certificate of Marriage

State of Maryland

LICENSE NO.

130912

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

I Hereby Certify that on the 6th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOHN MALKO

Age 69 Birthplace MD.  
(State)Groom's  
Residence

1012 S BOULDIN ST

Marital Status WIDOWERBride's  
Name

MARIE E GILLESPIE

Age 64 Birthplace MD.  
(State)Bride's  
Residence

2117 TOWNHILL RD BALTO CO MD

Marital Status WIDOWRelationship to groom if any NONELE ROY W. BEIMEL

Name of Officiating Clergy or Authorized Officer

License Date DEC. 6

85

DEACON- ROMAN CATHOLIC

Title and Religious Denomination or Office

707 HAMLEN ROAD

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 9 1985SAUL E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45351

## Certificate of Marriage

State of Maryland

LICENSE NO.

130778

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 1<sup>st</sup> day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **MICHAEL WARREN HILL**  
Groom's  
Residence **4402 PLAINEFIELD AV.**Age **30** Birthplace **MD.**  
(State)Marital Status **DIVORCED**Bride's  
Name **DEBORAH ANN HOLLOWAY**  
Bride's  
Residence **1206 E. 36TH ST.**Age **24** Birthplace **JAPAN**  
(State)Marital Status **SINGLE**Relationship to groom if any **NONE****ROBERT L. WHITE, JR.**

Name of Officiating Clergy or Authorized Officer

**PASTOR- MT. OLIVE F W B CHURCH**

Title and Religious Denomination or Office

**2411 GARRISON BLVD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 9 1985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **NOV 27 85**  
**JW**License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45352

# Certificate of Marriage

State of Maryland

LICENSE NO.  
130896

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 5th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ANTHONY J. WILLIS**

Age **39** Birthplace **MD.**  
(State)

Groom's  
Residence **4417 PIMLICO ROAD**

Marital Status **DIVORCED**

Bride's  
Name **PAULETTE C. PRYOR**

Age **41** Birthplace **MD.**  
(State)

Bride's  
Residence **4417 PIMLICO ROAD**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**MARCUS G. WOOD**

Name of Officiating Clergy or Authorized Officer

**PASTOR- PROVIDENCE BAPT. CHURCH**

Title and Religious Denomination or Office

**1401 PENNSYLVANIA AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 9 1985**

**PAULETTE E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **DEC. 5, 85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45353

## State of Maryland

 LICENSE NO.  
130704

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 7th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>MICHAEL A. CUFFLEY</b>	Age	<b>28</b>	Birthplace	<b>MD.</b>
Groom's Residence	<b>1627 CERCEAL ST.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>SABRINA G. HOBBS</b>	Age	<b>24</b>	Birthplace	<b>MISSOURI</b>
Bride's Residence	<b>1627 CERCEAL ST.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**

**KENNETH O. PHELPS, SR.**

Name of Officiating Clergy or Authorized Officer

**CHAPLAIN- SOUTHERN BAPTIST**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

License Fee \$

**25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45354

LICENSE NO.

130717

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name AL A. WINGATE

Age 52 Birthplace N.C.  
(State)

Groom's Residence 1306 HOMESTEAD STREET

Marital Status DIVORCED

Bride's Name EDNA PHILLIPS

Age 52 Birthplace N.C.  
(State)

Bride's Residence 1306 HOMESTEAD STREET

Marital Status DIVORCED

Relationship to groom if any NONE

FELTON WILLIAMS, JR.

Name of Officiating Clergy or Authorized Officer

License Date DEC 2 85

PASTOR- NEW 2nd BAPTIST CHURCH

Title and Religious Denomination or Office

214 E. LANVALE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 9 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45355

## Certificate of Marriage

State of Maryland

LICENSE NO.

130557

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DELMAS J LANE**Age **46** Birthplace **W VA**  
(State)Groom's Residence **6012 MOOREHEAD RD BALTO CO MD**Marital Status **DIVORCED**Bride's Name **PATRICIA M HARDING**Age **42** Birthplace **MD.**  
(State)Bride's Residence **6012 MOOREHEAD RD BALTO CO MD**Marital Status **DIVORCED**Relationship to groom if any **NONE****JAMES E. SWECKER**

Name of Officiating Clergy or Authorized Officer

**85 MINISTER- UNITED METH CHURCH**

Title and Religious Denomination or Office

**1500 PATAPSCO ST.**

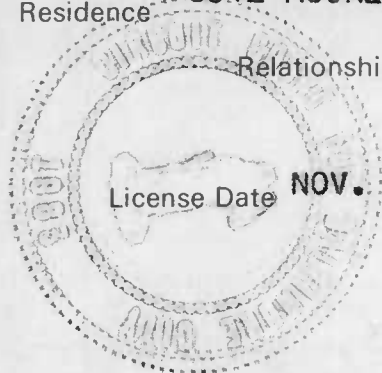
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 9 1985****SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the CourtLicense Fee \$ 22.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

85-45356

## Certificate of Marriage

State of Maryland

LICENSE NO.

130428

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

GLENN MICHAEL DAVIS

Age 27

Birthplace MD.  
(State)Groom's  
Residence

PO. BOX. 255 BROOKLANDVILLE., MD.

Marital Status SINGLE

Bride's  
Name

SUSAN ADLER CLARKE

Age 28 Birthplace MD.  
(State)Bride's  
Residence

PO. BOX 255 BROOKLANDVILLE., MD.

Marital Status DIVORCED

Relationship to groom if any

NONE

REV. HENRY COOPER

Name of Officiating Clergy or Authorized Officer

License Date

NOV 13

85

CANTOR EMERETUS HAR. SIUAI COUG

Title and Religious Denomination or Office

JW

PIKESVILLE MD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 11 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45357

## State of Maryland

 LICENSE NO.  
130544

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 7<sup>th</sup> day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's  
Name

ROBERT OWENS

 Age 35 Birthplace MD.  
(State)

 Groom's  
Residence

318 N. MONROE ST.

Marital Status DIVORCED

 Bride's  
Name

SABRINA DARCELLE HOOKER

 Age 25 Birthplace MD.  
(State)

 Bride's  
Residence

318 N. MONROE ST.

Marital Status SINGLE

Relationship to groom if any

NONE

ELDER SYLVIA C. WHYTE

Name of Officiating Clergy or Authorized Officer

ORDAINED PASTOR &amp; ELDER-APASTOLIC

Title and Religious Denomination or Office

4637 LENOX BLVD. ORLANDO, FLA. 32811

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 11 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date NOV. 25 85

tt

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45358

# Certificate of Marriage

State of Maryland

LICENSE NO.

130251

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY D JOHNSON**

Age **25** Birthplace **PA.**  
(State)

Groom's Residence **1022 E 20TH ST**

Marital Status **SINGLE**

Bride's Name **ANGELA M HALE**

Age **25** Birthplace **MD.**  
(State)

Bride's Residence **1022 E 20TH ST**

Marital Status **NONE**

Relationship to groom if any

**EUGENE BELCHER**

Name of Officiating Clergy or Authorized Officer

**BAPTIST**

Title and Religious Denomination or Office

**2209 PARK AVENUE**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

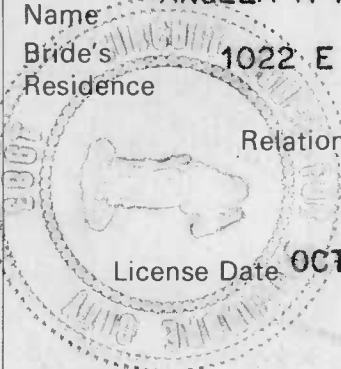
**DEC 9 1985**

**SAUNDRA E. BANKS, CLERK**

License Fee \$ 55.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45359

## Certificate of Marriage

State of Maryland

LICENSE NO.

130635

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>JAMES A. WILLIAMS, JR.</b>	Age	<b>23</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>1313 GORSUCH AVE.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>SHEQUITA J. S. WASHINGTON</b>	Age	<b>21</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>1313 GORSUCH AVE.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

BISHOP EDITH A. WILSON

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 20 85**MT. ZION APOSTOLIC FAITH CHURCH

Title and Religious Denomination or Office

tt

5501 LIBERTY HEIGHTS AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 13 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45360

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130810

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WILLIAM R MC CLAYTON JR

Age 63

Birthplace MD.  
(State)Groom's  
Residence

109 LAPAIX LA BALTO CO MD

Marital Status

DIVORCED

Bride's  
Name

JOANNE V PALMISANO

Age 50

Birthplace PA.  
(State)Bride's  
Residence

109 LAPAIX LA BALTO CO MD

Marital Status

DIVORCED

Relationship to groom if any

NONE

JAMES J. DITILLO, S.J.

Name of Officiating Clergy or Authorized Officer

License Date DEC. 2 85

ROMAN CATHOLIC PRIEST

Title and Religious Denomination or Office

4501 N. CHARLES ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 13 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45361

State of Maryland

LICENSE NO.

130923

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **SAMUEL MC D. WILLIAMS** Age **35** Birthplace **MD.**  
(State)

Groom's Residence **5603 FERNPARK AVE.** Marital Status **DIVORCED**

Bride's Name **MARGARET E. STUKES** Age **38** Birthplace **S. CAR.**  
(State)

Bride's Residence **1816 ASHLAND AVE.** Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BISHOP PRESTON E. WILLIAMS**

Name of Officiating Clergy or Authorized Officer

**THE FIRST EMMANUEL APOSTOLIC CHURCH**

Title and Religious Denomination or Office

**4534-38 REISTERSTOWN RD. 21215**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 13 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD, 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45362

## Certificate of Marriage

State of Maryland

LICENSE NO.

130907

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 63 day of December 19 85

the following persons were by me united in marriage at

Baltimore, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

LEONARD M JOHNSON JR

Age 32

Birthplace

MD.

(State)

Groom's  
Residence

820 WATERVIEW DR BALTO CO MD

Marital Status

DIVORCED

Bride's  
Name

CARSILEE D CAUCHON

Age 31

Birthplace

S CAR

(State)

Bride's  
Residence

820 WATERVIEW DR BALTO CO MD

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date DEC. 6

85

Name of Officiating Clergy or Authorized Officer

Rev. E. Daniel Slater

Title and Religious Denomination or Office

Minister - United Methodist Church

Address of Clergy or Authorized Officer

3646 Coolidge Ave, Balto, MD 21229

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45363

## Certificate of Marriage

State of Maryland

LICENSE NO.

130901

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8<sup>th</sup> day of December 19 88the following persons were by me united in marriage at Baltimore, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

HAROLD G. WALKER

Age **63**

Birthplace

**MI.**  
(State)Groom's  
Residence

4003-D MARJEFF PL. BALTO.CO.,MD

Marital Status **DIVORCED**Bride's  
Name

CAROLINE E. VENDETTI

Age **56**

Birthplace

**MD.**  
(State)Bride's  
Residence

4003-D MARJEFF PL. BALTO.CO.,MD

Marital Status **DIVORCED**Relationship to groom if any **NONE**

License Date

DEC 5

85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45364

## Certificate of Marriage

State of Maryland

LICENSE NO.

130869

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8th day of December 19 51

the following persons were by me united in marriage at

Baltimore MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JERRY A KNOTTS

Age 25

Birthplace

MD.

(State)

Groom's  
Residence

420 SECLUDED POST CIRCLE A.A.CO.MD

Marital Status

SINGLE

Bride's  
Name

CYNTHIA A KRIEWALD

Age 24

Birthplace

MD.

(State)

Bride's  
Residence

104 17TH AVE A.A.CO.MD

Marital Status

SINGLE

NONE

Relationship to groom if any

License Date DEC. 4 85

TT

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45365

## Certificate of Marriage

State of Maryland

LICENSE NO.

130919

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6<sup>th</sup> day of December 1985

the following persons were by me united in marriage at

Baltimore, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**IBRAHIM M. GAMAL**Age **47** Birthplace **MD.**  
(State)Groom's  
Residence**1703 MOSHER ST.**Marital Status **WIDOWER**Bride's  
Name**BRENDADINE KING**Age **37** Birthplace **MD.**  
(State)Bride's  
Residence**2903 ARUNAH AVE.**Marital Status **DIVORCED**Relationship to groom if any **NONE**License Date **DEC. 6****85**

Name of Officiating Clergy or Authorized Officer

Imam Yaqub Muhammad

Title and Religious Denomination or Office

Imam / Islam  
803 N. Mount St.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 12 1985** **DEC 12 1985**  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45366

## Certificate of Marriage

State of Maryland

LICENSE NO.

130942

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9<sup>th</sup> day of December 19 85

the following persons were by me united in marriage at

Baltimore Md.  
(City of Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

GEORGE WILLIAM EUGENE MACK

Age

37

Birthplace

MD.

(State)

Groom's

Residence

920 WILDWOOD PWKY.

Marital Status

SINGLE

Bride's

Name

ETTA LOUISE DAVIS

Age

29

Birthplace

N.Y.

(State)

Bride's

Residence

3624 YENMAR LN. BALTO.CO.,MD

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date

DEC. 9

85

Name of Officiating Clergy or Authorized Officer

Rev. Nathaniel Love, Sr.

Title and Religious Denomination or Office

Baptist - Minister

Address of Clergy or Authorized Officer

3815 Ferndale Ave

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 12 1985

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45367

## Certificate of Marriage

State of Maryland

LICENSE NO.

130927

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9<sup>th</sup> day of December 19 85

the following persons were by me united in marriage at

Baltimore, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

IRSTON LARUE HAIR

Age

34

Birthplace

WASH., D.C.

(State)

Groom's  
Residence

1505 LANGFORD RD. BALTO. CO., MD.

Marital Status

DIVORCED

Bride's  
Name

WONDRA DEAN CANNON

Age

34

Birthplace

N. CAROLINA

(State)

Bride's  
Residence

4015 RAYMONN AVENUE

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date DEC. 6,

85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45368

State of Maryland

LICENSE NO.

130849

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 17 day of December 1985

the following persons were by me united in marriage at

Baltimore, Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

FRANCIS D. PASQUORIELLO

Age

32

Birthplace

MD.

(State)

Groom's  
Residence

308 WINDSOR CT. BALTO. CO., MD.

Marital Status

SINGLE

Bride's  
Name

LINDA M. CHRONOWSKI

Age

29

Birthplace

MD.

(State)

Bride's  
Residence

516 S. DURHAM STREET

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

DEC 3

85

Name of Officiating Clergy or Authorized Officer

Rev. Francis J. Okroy, S. Ch.

Title and Religious Denomination or Office

Associate Pastor Holy Rosary R.C. Church  
408 S. Chester St 21231

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45369

State of Maryland

LICENSE NO.

130829

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7<sup>th</sup> day of December 1985

the following persons were by me united in marriage at

Baltimore, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM H. BOLDEN**Age **48** Birthplace **VA.**  
(State)Groom's Residence **422 ORCHARD ST.**Marital Status **DIVORCED**Bride's Name **SAUNDRA B. BYRD**Age **30** Birthplace **PA.**  
(State)Bride's Residence **422 ORCHARD ST.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 29****85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45370

LICENSE NO.

130794

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 1ST day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

PERCIE RONDON

Age 37

Birthplace MD.  
(State)

Groom's  
Residence

2456 SEABURY RD

Marital Status

**DIVORCED**

Bride's  
Name

BRENDA D RONDON

Age 37

Birthplace MD.  
(State)

Bride's  
Residence

3912 RIDGEWOOD RD

Marital Status

**DIVORCED**

**NONE**

Relationship to groom if any

WILLIAM H. HOLLEY, JR

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29 85**

(ELDER) JEHOUAH WITNESS

Title and Religious Denomination or Office

231 S. HILTON ST/

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

DEC 04 1985

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45371

## Certificate of Marriage

State of Maryland

LICENSE NO.

130807

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 1st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MICHAEL W. GRIFFIN

Age 24

Birthplace

MD.

(State)

Groom's

Residence

416 S. DUNCAN ST.

Marital Status

SINGLE

Bride's

Name

CAROLYN P. WHETSTONE

Age 26

Birthplace

MD.

(State)

Bride's

Residence

229 N. PATTERSON PARK AV.

Marital Status

SINGLE

Relationship to groom if any NONE

WILLIAM G. THOMPSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 29

85

PASTOR- AMERICAN LUTHERAN CHURCH

Title and Religious Denomination or Office

403 N. PATTERSON PK, AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 4 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45372

LICENSE NO.

130853

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

I Hereby Certify that on the 8<sup>th</sup> day of December 1985

the following persons were by me united in marriage at

Baltimore, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

STEPHEN M. PIPICH

Age 30

Birthplace

PA.  
(State)

Groom's  
Residence

4106 WELDON PLACE WEST. 21211

Marital Status

DIVORCED

Bride's  
Name

PATRICIA ANN WITT

Age 27

Birthplace

MD.  
(State)

Bride's  
Residence

4106 WELDON PLACE WEST. 21211

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date

DEC 2

85

David W. Rimbock  
Name of Officiating Clergy or Authorized Officer

Ministry - United Methodist Church  
Title and Religious Denomination or Office

3449 Falls Rd Balto, MD 21211  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

DEC 1 21985

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45373

## Certificate of Marriage

State of Maryland

LICENSE NO.

130418

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 1st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ROBERT A ROBINSON JR

Age 33

Birthplace

N Y

(State)

Groom's  
Residence

1124 ELBANK RD

Marital Status

SINGLE

Bride's  
Name

LINDA W BACH

Age 42

Birthplace

MD.

(State)

Bride's  
Residence

1124 ELBANK RD

Marital Status

DIVORCED

Relationship to groom if any

NONE

ERNEST R.D. SMART

Name of Officiating Clergy or Authorized Officer

PASTOR- SECOND PRESBYTERIAN CHURCH

Title and Religious Denomination or Office

2 STRATFORD RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45374

## Certificate of Marriage

State of Maryland

LICENSE NO.

130764

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 8<sup>th</sup> day of December 19 85the following persons were by me united in marriage at Baltimore, md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name ALAN D. HECHTAge 67 Birthplace MD.  
(State)Groom's  
Residence 200 CROSS KEYS ROADMarital Status WIDOWERBride's  
Name MARCIA L. OBERFELDAge 51 Birthplace MD.  
(State)Bride's  
Residence 6417 ELRAY DRIVEMarital Status DIVORCEDRelationship to groom if any NONELicense Date NOV. 27 85

TT

Donald R. Berlin, Rabbi  
Name of Officiating Clergy or Authorized Officer  
Rabbi - Temple Otch Shalom  
Title and Religious Denomination or Office  
7310 Park Heights Ave Baltimore, md  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 1 2 1985

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

State of Maryland

85-45375

LICENSE NO.

130731

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7<sup>th</sup> day of December 19 85

the following persons were by me united in marriage at

Baltimore, Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

L: 04

Groom's  
Name

TYRONE D. MUSGROVE

Age 19 Birthplace MD.  
(State)Groom's  
Residence

1352 HOMESTEAD ST.

Marital Status SINGLE

Bride's  
Name

FELICIA REYNOLDS

Age 19 Birthplace VA.  
(State)Bride's  
Residence

1352 HOMESTEAD ST.

Marital Status SINGLE

Relationship to groom if any NONE

License Date

NOV. 25 85

Name of Officiating Clergy or Authorized Officer

Alex Young  
Rev. Alex Young Pastor

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

1609 E. Cold Springs Lane

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 1 2 1985

License Fee \$

25.00

SAINDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45376

## Certificate of Marriage

State of Maryland

LICENSE NO.

130563

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7<sup>th</sup> day of December 19 85

the following persons were by me united in marriage at

Baltimore, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ARTHUR PHILIP GRANDIZIO

Age 24

Birthplace

N.Y.

(State)

Groom's  
Residence

9016 PERRYVALE RD.

Marital Status

SINGLE

Bride's  
Name

BARBARA DAWN RODRIGUEZ

Age 22

Birthplace

MD.

(State)

Bride's  
Residence

2929 N. CHARLES ST.

Marital Status

SINGLE

Relationship to groom if any NONE

License Date

NOV 15 85

JW

Fr. Edward Wagner

Name of Officiating Clergy or Authorized Officer

Catholic Priest

Title and Religious Denomination or Office

101 Church Lane

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 1 2 1985

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

## Certificate of Marriage

State of Maryland

LICENSE NO.

130504

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7<sup>th</sup> day of December 1988

the following persons were by me united in marriage at

Baltimore, md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LEROY W. WORSHAM** Age **66** Birthplace **MD.**  
 (State)  
 Groom's Residence **P.O. BOX 153 GLENARM, MD. BALTO.CO., MD.** Marital Status **DIVORCED**  
 Bride's Name **MOLLY E. PARKS** Age **79** Birthplace **VA.**  
 (State)  
 Bride's Residence **500 VIRGINIA AVE. BALTO.CO., MD.** Marital Status **WIDOW**  
 Relationship to groom if any **NONE**

License Date **NOV. 12 85**Rev. Eugene R. Alexander

Name of Officiating Clergy or Authorized Officer

Pastor Reformation Lutheran Church

Title and Religious Denomination or Office

6200 Loch Raven Blvd.

Address of Clergy or Authorized Officer

## CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 1 21985**License Fee \$ 25.00SAUNDRA E. BARRS, Clerk

Signature - Clerk of the Court

2

85-45378

# Certificate of Marriage

State of Maryland

LICENSE NO.

130273

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7<sup>th</sup> day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **VERNON L. SAVAGE**

Age **43** Birthplace **VA.**  
(State)

Groom's Residence **2635 LAURETTA AVE.**

Marital Status **DIVORCED**

Bride's Name **LOIS A. BELLINGER**

Age **38** Birthplace **MD.**  
(State)

Bride's Residence **2635 LAURETTA AVE.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

ARNOLD W. HOWARD

Name of Officiating Clergy or Authorized Officer

ASSISTANT PASTOR

Title and Religious Denomination or Office

ENON BAPTIST CHURCH

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

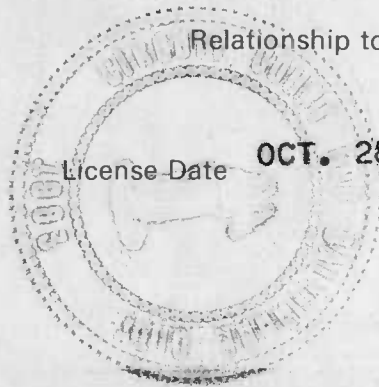
I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



License Date **OCT. 28, 85**

License Fee \$ 25.00

2

# Certificate of Marriage

State of Maryland

85-45379

LICENSE NO.

129662

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 7<sup>th</sup> day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MORRIS RANDOLPH ANDERSON**

Age **44** Birthplace **PA.**  
(State)

Groom's Residence **645 BARTELLETT AV.**

Marital Status **SINGLE**

Bride's Name **NAOMI ESTELLE BRADY**

Age **42** Birthplace **MD.**  
(State)

Bride's Residence **833 N. COLLINGTON AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**PAUL W. CARRINGTON**

Name of Officiating Clergy or Authorized Officer

License Date **SEPT 25 85**

**BISHOP OF CHURCH OF THE TRUE BELIEVERS INC.**

Title and Religious Denomination or Office

**JW**

**2201 PRENTISS PLACE**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

**DEC 1 21985**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45380

# Certificate of Marriage

State of Maryland

LICENSE NO.  
129590

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 2nd day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT LEE PLAYER**

Age **34** Birthplace **S.C.**  
(State)

Groom's Residence **1625 N. FULTON AVENUE**

Marital Status **DIVORCED**

Bride's Name **BETTY L. HICKS**

Age **37** Birthplace **MD.**  
(State)

Bride's Residence **1625 N. FULTON AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**EDWARD W. STANCIL**

Name of Officiating Clergy or Authorized Officer

**BISHOP- EDWARD W. STANCIL**

Title and Religious Denomination or Office

**5202 BELLEVILLE AVE.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

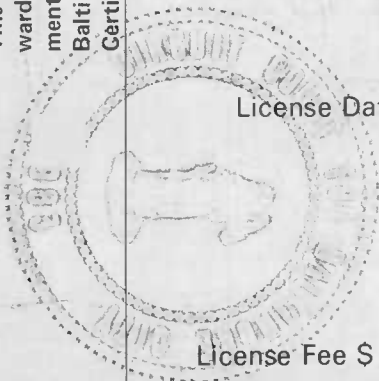
office on

**DEC 5 1985**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 35.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



85-45381

## Certificate of Marriage

State of Maryland

LICENSE NO.

130332

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 1st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name RICHARD I BOOTHAge 43 Birthplace MD.  
(State)Groom's Residence 4406 MORAVIA RDMarital Status DIVORCEDBride's Name LORRAINE M GILLIAMAge 38 Birthplace MD.  
(State)Bride's Residence 4406 MORAVIA RDMarital Status DIVORCED

Relationship to groom if any

NONEROBERT M. JOHNSON

Name of Officiating Clergy or Authorized Officer

License Date NOV 185 PASTOR- FIRST BAPTIST CHURCH

Title and Religious Denomination or Office

JW 4200 LIBERTY HEIGHTS AVE.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 4 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

2

85-45382

## Certificate of Marriage

State of Maryland

LICENSE NO.

130694

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 1st day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name WILLIAM ODELL SMITHAge 27 Birthplace MARYLAND  
(State)Groom's Residence 2404 ALLENDALE ROADMarital Status SINGLEBride's Name KAREN LOUISE NICHOLSONAge 27 Birthplace MARYLAND  
(State)Bride's Residence 2041 WHEELER AVENUEMarital Status SINGLERelationship to groom if any NONEIRVIN C. LOCKMAN

Name of Officiating Clergy or Authorized Officer

PASTOR- UNITED METH.

Title and Religious Denomination or Office

1119 W. LANVALE ST.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 5 1985  
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45383

LICENSE NO.

130795

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 3rd day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARTIN WILLIAM LANG**

Age **33** Birthplace **MD.**  
(State)

Groom's Residence **2901 PINWOOD AVENUE**

Marital Status **DIVORCED**

Bride's Name **CHRISTINA P. WHITE**

Age **32** Birthplace **WIS.**  
(State)

Bride's Residence **2901 PINWOOD AVENUE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**CLIFFORD P. LLOYD**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29**

**85 MINISTER- UNITED METH CHURCH**

Title and Religious Denomination or Office

**5315 HARFORD RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45384

## Certificate of Marriage

State of Maryland

LICENSE NO.  
127045

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20th day of June 19 85

the following persons were by me united in marriage at

Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**DANIEL CHARLES BARAL**Age **23**Birthplace **NEW YORK**  
(State)Groom's  
Residence**ROCHESTER, NEW YORK**Marital Status **SINGLE**Bride's  
Name**CYNTHIA SARA FUTERAL**Age **22** Birthplace **MARYLAND**  
(State)Bride's  
Residence**3315 CLARAN ROAD**Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date

**JUNE 11 85**

Name of Officiating Clergy or Authorized Officer

Rabbi Joseph M. Baumbarten

Title and Religious Denomination or Office

Rabbi  
3200 Sabzmett Rd.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 18 1985**

License Fee \$

**25.00****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45385

## Certificate of Marriage

State of Maryland

LICENSE NO.

130121

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 26 day of Oct. 1985

the following persons were by me united in marriage at

Balto, md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GERARD HARRY SHANLEY**

69

Age **35** Birthplace **NEW YORK**  
(State)Groom's Residence **OSWEGO, NEW YORK**Marital Status **SINGLE**Bride's Name **VIRGINIA RICHARDSON BARRETT**

25

Age **33** Birthplace **MARYLAND**  
(State)Bride's Residence **339 HOMELAND SOUTHWAY**Marital Status **SINGLE**Relationship to groom if any **NONE**Lawrence M. Estey  
Name of Officiating Clergy or Authorized OfficerLicense Date **OCT. 23** **85**

Title and Religious Denomination or Office

5603 N. Charles St.  
Address of Clergy or Authorized Officer

TT

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 1 21985****SANDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45386

## Certificate of Marriage

State of Maryland

LICENSE NO.  
127652

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	ALBERT L. THEILER, SR.	Age	57	Birthplace	KY.
Groom's Residence	LOUISVILLE, KY.	Marital Status	WIDOWER		
Bride's Name	DORIS E. SMITH	Age	57	Birthplace	S. CAR.
Bride's Residence	2403 E. FAIRMOUNT AVE.	Marital Status	WIDOW		
Relationship to groom if any	NONE				

License Date JULY 31 85

HAROLD D. CAMPBELL

Name of Officiating Clergy or Authorized Officer

PASTOR- PATTERSON PARK BAPT. CHURCH

Title and Religious Denomination or Office

3115 EASTERN AVENUE

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45387

LICENSE NO.

130295

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23rd day of NOVEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

LESTER BRADLEY

47

Age 52 Birthplace WASH DC  
(State)

Groom's  
Residence

WASHINGTON D C

Marital Status

DIVORCED

Bride's  
Name

JOYCE O GORDON

25

Age 37 Birthplace VA  
(State)

Bride's  
Residence

302 CEDARRUN PL BALTO CO MD

Marital Status  
NONE

SINGLE

Relationship to groom, if any

SAMUEL B. REDD

Name of Officiating Clergy or Authorized Officer

License Date NOV. 4, 85

PASTOR- MT. ARAAT BAPT. CHURCH

Title and Religious Denomination or Office

3611 GRANTLEY RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45388

## Certificate of Marriage

State of Maryland

LICENSE NO.

130369

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN JOSEPH MURAWSKI**

45

Age **25** Birthplace **PA.**  
(State)Groom's Residence **WATERFORD, CONNECTICUT**Marital Status **DIVORCED**Bride's Name **MICHELE LYNN ABBOTT**

25

Age **22** Birthplace **MD.**  
(State)Bride's Residence **105 14th AVENUE A.A. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE**JOSEPH W. KRACH

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 4,**

85

ASSOC. PASTOR - ST. ROSE of LIMA R CATH.  
Title and Religious Denomination or Office  
3803 FURTH ST. CHURCH

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45389

## Certificate of Marriage

State of Maryland

LICENSE NO.

130413

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **STEPHEN BRUCE LEBAU**Age **25** Birthplace **ILLINOIS**  
(State)Groom's Residence **CHICAGO, ILLINOIS**Marital Status **SINGLE**Bride's Name **ELAINE ELLEN WEINER**Age **24** Birthplace **MARYLAND**  
(State)Bride's Residence **CHICAGO, ILLINOIS**Marital Status **SINGLE**Relationship to groom if any **NONE****JOEL H. ZAIMAN**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 7, 85****RABBI- JEWISH**

Title and Religious Denomination or Office

**8100 STEVENSON RD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 4 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45390

## Certificate of Marriage

State of Maryland

LICENSE NO.

130774

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name MIN HONG PARK  
 Groom's Residence LYNDHUST, NEW JERSEY.  
 Bride's Name HUI SOON KWON  
 Bride's Residence 400 W. 27TH ST.

Age 30 Birthplace KOREA  
 (State)

Marital Status SINGLE

Age 22 Birthplace KOREA  
 (State)

Marital Status SINGLERelationship to groom if any NONEYOUNG SEOP LEE

Name of Officiating Clergy or Authorized Officer

PASTOR-PRESBYTERIAN CHURCH

Title and Religious Denomination or Office

9312 WALTHAM WOODS RD. BALTO., MD 21234

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 04 1985

SAUNDRA E. BANKS, CLERK  
 Signature - Clerk of the Court

License Fee \$ 25.00

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45391

## Certificate of Marriage

State of Maryland

LICENSE NO.

129314

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9<sup>th</sup> day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DONALD R. WILLIAMS

Age 29 Birthplace TX.  
(State)

Groom's Residence E. ORANGE, NEW JERSEY

Marital Status SINGLE

Bride's Name KAREN Y. AUTRY

Age 25 Birthplace MD.  
(State)

Bride's Residence PLAINFIELD, NEW JERSEY

Marital Status SINGLE

Relationship to groom if any NONE

WILLIAM W. PAYNE

Name of Officiating Clergyman or Authorized Officer

License Date SEPT 16 85

PASTOR- EMERITUS CITY TEMPLE

Title and Religious Denomination or Office

2401 GARRISON BLVD.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 4 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45392

## Certificate of Marriage

State of Maryland

LICENSE NO.

129209

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 30th day of NOVEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CRAIG A BROWN

72

Age 28

Birthplace

MD.

(State)

Groom's  
Residence

WILLARD OHIO

Marital Status SINGLE

Bride's  
Name

GWENDOLYN M PARKER

25

Age 30

Birthplace

MD.

(State)

Bride's  
Residence

1304 ELSON PLACE P.G.CO.MD

Marital Status SINGLE

Relationship to groom if any

NONE

MAURICE J. BLACKWELL

Name of Officiating Clergyman or Authorized Officer

License Date NOV 13 85

ST. EDWARD'S R.C. CHURCH

Title and Religious Denomination or Office

901 POPLAR GROVE ST.

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 2 3 1985

License Fee

\$25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45393

## Certificate of Marriage

State of Maryland

LICENSE NO.

130754

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **LERON ALLEN**47 Age 22 Birthplace **WASH.**  
(State)Groom's  
Residence **WASHINGTON, D.C.**Marital Status **SINGLE**Bride's  
Name **FRANCINE ELIZABETH HARRIS**25 Age 25 Birthplace **MD.**  
(State)Bride's  
Residence **2168 HOLLINS ST.**Marital Status **SINGLE**Relationship to groom if any **NONE****DAVID BOYD**

Name of Officiating Clergy or Authorized Officer

License Date **NOV 27 85****BAPTIST**

Title and Religious Denomination or Office

**1821 WEST BALTIMORE ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45394

## Certificate of Marriage

State of Maryland

LICENSE NO.

130791

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ROBERT LEE CRYSTAL**Age **36** Birthplace **MD.**  
(State)Groom's Residence **OVIEDO, FLORIDA**Marital Status **SINGLE**Bride's Name **ANN C. HUCKABY**Age **29** Birthplace **AL.**  
(State)Bride's Residence **OVIEDO, FLORIDA**Marital Status **DIVORCED**Relationship to groom if any **NONE****HENRY COOPER**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 27 85****CANTOR EMERITUS-HAR SINAI CONG.**

Title and Religious Denomination or Office

**PIKESVILLE, MD.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45395

## Certificate of Marriage

State of Maryland

LICENSE NO.

130701

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23RD. day of NOVEMBER 1985BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**EARL C HAWKINS**

25

Age

31

Birthplace

MD.

(State)

Groom's  
Residence**5706 NARCISSUS AVE**

Marital Status

**DIVORCED**Bride's  
Name**JACQUELINE S. BURNETTE**

54

Age

23

Birthplace

ILL

(State)

Bride's  
Residence**TOPEKA KANSAS**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE****REV. ERA S. FERRELL**

Name of Officiating Clergy or Authorized Officer

**ASSOCIATE MINISTER-EMMANUEL C.C. CHURCH**

Title and Religious Denomination or Office

**1530 W. LEXINGTON ST.**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **NOV. 22****85**

License Fee \$

**25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45396

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130390

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7<sup>th</sup> day of NOVEMBER 85 1985the following persons were by me united in marriage at BALTIMORE. MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	MICHAEL A MC BRIDE	25	Age	38	Birthplace	WASH DC
Groom's Residence	1803 W LEXINGTON ST		Marital Status		(State)	SINGLE
Bride's Name	JULIA M WILLIAMS	46	Age	43	Birthplace	N CAR
Bride's Residence	DOVER DELAWARE		Marital Status		(State)	DIVORCED
Relationship to groom if any				NONE		

ELDER THOMAS E. DOUGLAS

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 5**

85

ELDER, APOSTOLIC

Title and Religious Denomination or Office

1717 DEARWOOD CT. EDGEWOOD MD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 3 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45397

## Certificate of Marriage

State of Maryland

LICENSE NO.

130803

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30th day of NOVEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CLIFTON R CHERRY

25

Age 22

Birthplace MD.  
(State)Groom's  
Residence

538 N MOUNT ST

Marital Status SINGLE

Bride's  
Name

SANDRA M WILLIAMS

46

Age 24 Birthplace DEL  
(State)Bride's  
Residence

DOVER DEL.

Marital Status SINGLE

Relationship to groom if any

NONE

THOMAS E. DOUGLAS

Name of Officiating Clergy or Authorized Officer

ELDER, HOLINESS

Title and Religious Denomination or Office

1717 DEARWOOD CT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

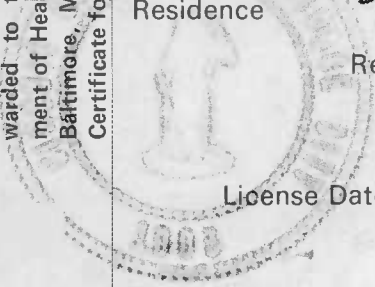
DEC 3 1985

SANDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45398

## Certificate of Marriage

State of Maryland

LICENSE NO.

130533

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18th day of NOVEMBER 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM J. STRAW**Age **27** Birthplace **PA.**  
(State)Groom's Residence **NEPTUNE BEACH, FLORIDA**Marital Status **SINGLE**Bride's Name **SHARON LYNN OWENS**Age **24** Birthplace **MD.**  
(State)Bride's Residence **NEPTUNE BEACH, FLORIDA**Marital Status **DIVORCED**Relationship to groom if any **NONE****MARK R. BOLING**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 18,****85 PASTOR - BROOKLYN UNITED METH. CHURCH**

Title and Religious Denomination or Office

**401 PONTIAC AVE,**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2, 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45399

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130980

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 13th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WAYNE L WYNN

Age 24Birthplace DEL.  
(State)Groom's  
Residence

WILMINGTON DEL.

Marital Status

SINGLEBride's  
Name

ANGELETTA DAVIS

Age 23Birthplace DEL.  
(State)Bride's  
Residence

NEW CASTLE DEL.

Marital Status

SINGLE

Relationship to groom, if any

NONE

HOWARD R. QUEEN

Name of Officiating Clergy or Authorized Officer

PASTOR- PLEASANT HOPE BAPTIST CHURCH

Title and Religious Denomination or Office

3719 NORTONIA RD.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 17 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date

DEC 13 85

JW

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45400

## Certificate of Marriage

State of Maryland

LICENSE NO.

130832

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 13<sup>th</sup> day of December 19 85

the following persons were by me united in marriage at

Baltimore, md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

TIMOTHY W TILLMAN

Age 70

Birthplace

MD.

(State)

Groom's  
Residence

JACKSONVILLE N CAR

Marital Status

SINGLE

Bride's  
Name

DENISE J WARREN

Age 25

Birthplace

MD.

(State)

Bride's  
Residence

600 WILDWOOD PKWY

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date DEC. 4

85

Name of Officiating Clergy or Authorized Officer

Rev. Levester Waddy

Title and Religious Denomination or Office

Christ Temple Church

Address of Clergy or Authorized Officer

2117 Pennsylvania Ave

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45401

## Certificate of Marriage

State of Maryland

LICENSE NO.

129010

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 7<sup>th</sup> day of Dec 1985the following persons were by me united in marriage at Balto. Md.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MALCOLM L. PETERSON** 84 Age **57** Birthplace **WASH. ST.**  
 Groom's Residence **WASHINGTON, STATE** Marital Status **DIVORCED**  
 Bride's Name **DEBORAH M. PROUT** 25 Age **33** Birthplace **MASS.**  
 Bride's Residence **402 TANTALLION CT.** Marital Status **SINGLE**  
 Relationship to groom if any **NONE**

License Date **AUG. 30, 85**

Name of Officiating Clergyman or Authorized Officer

Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 12-16-85**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45402

## Certificate of Marriage

State of Maryland

LICENSE NO.

130626

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14<sup>th</sup> day of December 19 85

the following persons were by me united in marriage at

Baltimore, md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name CARL MARK MADISON48 Age 27 Birthplace ALABAMA  
(State)Groom's Residence PENSACOLA, FLORIDAMarital Status SINGLEBride's Name TONIA RENEE BROCKWAY25 Age 16 Birthplace MARYLAND  
(State)Bride's Residence 407 REVERLY AVE. A.A. CO., MD.Marital Status SINGLERelationship to groom, if any NONE

License Date

NOV 21

85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00DEC 18 1985  
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45403

## Certificate of Marriage

State of Maryland

LICENSE NO.

130777

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 14<sup>th</sup> day of December 1985the following persons were by me united in marriage at Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>SAMUEL DERWIN EDMONDS</b>	Age	<b>22</b>	Birthplace	<b>VIRGINIA</b>
				(State)	
Groom's Residence	<b>BLACKSTONE, VIRGINIA</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>MONIQUE DENISE RETNOLDS</b>	Age	<b>23</b>	Birthplace	<b>NEW YORK</b>
				(State)	
Bride's Residence	<b>2538 ROBB STREET</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **NOV. 29 85**

William H. Crosby.  
Name of Officiating Clergy or Authorized Officer

Jehovah's Witness  
Title and Religious Denomination or Office

1507. E. 29<sup>th</sup> St  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **DEC 18 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45404

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130706

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **KEITH ALFONZO HAWKINS**Age **24** Birthplace **KENTUCKY**  
(State)Groom's  
Residence **111 WEST ST. GEORGETOWN, KY**Marital Status **SINGLE**Bride's  
Name **ROBERTA LEE RANDALL**Age **21** Birthplace **MARYLAND**  
(State)Bride's  
Residence **1617 EUTAW PLACE.**Marital Status **SINGLE**Relationship to groom if any **NONE****MARCUS G. WOOD**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29****85****PROVIDENCE BAPTIST CHURCH**Title and Religious Denomination or Office  
**1401 PENNSYLVANIA DR**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 1 1985****SAUNDRA E. BANKS, CLERK**

License Fee \$

**25.00**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45405

## Certificate of Marriage

State of Maryland

LICENSE NO.

131052

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

I Hereby Certify that on the 24th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ROBERT M BATTAGLIA

Age

31

Birthplace

MD.

(State)

Groom's  
Residence

4003 WESTSHORE BLVD TAMPA FLA

Marital Status

SINGLE

Bride's  
Name

LYDIA K CUMOR

Age

35

Birthplace

MD.

(State)

Bride's  
Residence

4 M ROCKINGHAM CT BALTO CO MD

Marital Status

DIVORCED

Relationship to groom if any

NONE

REV. BRUCE M. KELLEY

Name of Officiating Clergy or Authorized Officer

License Date

DEC 16

85

PASTOR, ST. LUKE EV. LUTHERAN CHURCH

Title and Religious Denomination or Office

7001 HARFORD RD. BALTO., MD 21234

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 27 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45406

## State of Maryland

LICENSE NO.

131077

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 28th day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**JEFFREY R. CLINTON**Age **22**Birthplace **OHIO**  
(State)Groom's  
Residence**ALTADENA, CALIFORNIA**Marital Status **SINGLE**Bride's  
Name**LESLIE C. BAUM**Age **22**Birthplace **MARYLAND**  
(State)

Bride's

Residence

**425 HASLETT RD. HARFORD CO., MD.**

Marital Status

**SINGLE**Relationship to groom if any **NONE**REV. STUART R. JONES

Name of Officiating Clergy or Authorized Officer

License Date **DEC 23 85**PASTOR ORTHODOX PRESBYTENIAN CHURCH

Title and Religious Denomination or Office

3846 ELMLEY AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of record filed in this

office on

**DEC 31 1985**License Fee \$ 25.00

**SANDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45407

## Certificate of Marriage

State of Maryland

LICENSE NO.

131047

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	EDWIN W. GALLAHAN	Age	26	Birthplace	VA.
				(State)	
Groom's Residence	RESTON, VIRGINIA	Marital Status	SINGLE		
Bride's Name	JOAN S. RAPOPORT	Age	24	Birthplace	MD.
				(State)	
Bride's Residence	RESTON, VIRGINIA	Marital Status	SINGLE		
Relationship to groom if any	NONE				

MARK G. LOEB

Name of Officiating Clergy or Authorized Officer

License Date DEC 27 85 RABBI BETHEL CON.

Title and Religious Denomination or Office

JW

8101 ARK HGTS 21208

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45408

## Certificate of Marriage

State of Maryland

LICENSE NO.

130895

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 28 day of Dec 1985

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **SERGIO B MATEO**Age **33** Birthplace **PHILIPPINES**  
(State)Groom's Residence **CHICAGO ILL**Marital Status **SINGLE**Bride's Name **OFELIA A MANSILLA**Age **31** Birthplace **PHILIPPINES**  
(State)Bride's Residence **2637 ST PAUL STREET**Marital Status **SINGLE**

Relationship to groom if any

**NONE**License Date **DEC. 9 85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45409

## Certificate of Marriage

State of Maryland

LICENSE NO.

130514

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20th day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ORVILLE MARSHALL LEE HAYNES, JR. Age 21 Birthplace MD.  
(State)Groom's Residence ST. LOUIS, MISSOURI Marital Status SINGLEBride's Name BETTY JEAN EMORY Age 21 Birthplace MD.  
(State)Bride's Residence 714 W. 33rd STREET Marital Status SINGLERelationship to groom if any NONEREV. FRANKLIN E. KELLER

Name of Officiating Clergy or Authorized Officer

PASTOR CHURCH OF THE BRETHREN

Title and Religious Denomination or Office

604 WEST 36th st.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985  
SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45410

# Certificate of Marriage

State of Maryland

LICENSE NO.

130595

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 22nd day of DECEMBER 1985

BALTIMORE, MD

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN E BOURGEOIS**

Age **30** Birthplace **CALIF**  
(State)

Groom's Residence **ARLINGTON VA**

Marital Status **SINGLE**

Bride's Name **SALLY A KADIN**

Age **23** Birthplace **PA**  
(State)

Bride's Residence **ARLINGTON VA**

Marital Status **SINGLE**

**NONE**

Relationship to groom if any

**MORTON M. KANTER**

Name of Officiating Clergy or Authorized Officer

**RABBI-JEWISH**

Title and Religious Denomination or Office

**5103 SEBT\*BEK DR,**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **NOV. 29 85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45411

LICENSE NO.  
130854

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 21ST day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

BYRAN L. JEWSON

Age 28

Birthplace

WASH. D.C.

Groom's  
Residence

2814 ERIE ST. WASH. D.C. SE.

Marital Status

DIVORCED

Bride's  
Name

JANICE L. COLEMAN

Age 28

Birthplace

MD.  
(State)

Bride's  
Residence

9815 WINANDS RD. BALTO. CO., MD.

Marital Status

SINGLE

Relationship to groom if any NONE

LESTER L. ROSEWELL

Name of Officiating Clergy or Authorized Officer

**85 MINISTER JEHOVAH'S WITNESSES**

Title and Religious Denomination or Office

1407 IRVING ST. NE WASHINGTON DC.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on

**DEC 24 1985**

**SANDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **DEC. 3**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45412

## Certificate of Marriage

State of Maryland

LICENSE NO.

130947

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 21ST day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOHNNY DAVIS

Age 23

Birthplace

S.C.  
(State)

Groom's

Residence

CHARLESTON, SOUTH CAROLINA

Marital Status

SINGLE

Bride's

Name

MARIA ANGELA LEAK

Age 23

Birthplace

MD.  
(State)

Bride's

Residence

1516 MORELAND AV.

Marital Status

SINGLE

Relationship to groom if any

NONE

JOHN R. BRYANT

Name of Officiating Clergy or Authorized Officer

PASTOR-A.M.E. CHURCH

Title and Religious Denomination or Office

1300 DRUID HILL AV.

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45413

# Certificate of Marriage

## State of Maryland

LICENSE NO.  
130830

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 28th day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>ANDREW L JOHN</b>	Age	<b>23</b>	Birthplace	<b>PA.</b> (State)
Groom's Residence	<b>BROOKLYN N.Y.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>AMY E GOULD</b>	Age	<b>23</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>BROOKLYN N.Y.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **DEC. 23** **85**

DR. ALBERT W. BUSH, JR., PASTOR  
Name of Officiating Clergy or Authorized Officer  
THE ROLAND PARK PRESBYTERIAN CHURCH  
Title and Religious Denomination or Office  
4801 ROLAND AV.  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 31 1985  
SAUNDRA E. BANKS, CLERK  
Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45414

## Certificate of Marriage

State of Maryland

LICENSE NO.

130643

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **TREVOR SAINT LEE GORDON**Age **29** Birthplace **JAMAICA**  
(State)Groom's Residence **5403 GIST AVENUE**Marital Status **SINGLE**Bride's Name **DAWN THERESA SIMMONDS**Age **23** Birthplace **JAMAICA**  
(State)Bride's Residence **REGINA, CANADA**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 29 85****BISHOP E. A. WILSON**  
Name of Officiating Clergy or Authorized Officer**MT. ZION APOSTOLIC FAITH CHURCH**  
Title and Religious Denomination or Office**5501 LIBERTY HEIGHTS AV.**  
Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **DEC 13 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45415

## Certificate of Marriage

State of Maryland

LICENSE NO.

130075

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **A. BRIAN LIDDICOAT**Age **41** Birthplace **MONTANA**  
(State)Groom's Residence **DEEP RIVER, CONNECTICUT**Marital Status **DIVORCED**Bride's Name **CHARMAINE R. HENNINGER**Age **30** Birthplace **MARYLAND**  
(State)Bride's Residence **DEEP RIVER, CONNECTICUT**Marital Status **SINGLE**Relationship to groom if any **NONE**ALFRED B. STARRATT

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 19 85**RECTOR EMERITUS, EMMANUEL EPI. CHURCH

Title and Religious Denomination or Office

811 CATHEDRAL ST. BALTO., MD. 21201

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 13 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 28.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45416

## Certificate of Marriage

State of Maryland

LICENSE NO.

130600

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 7<sup>th</sup> day of December 1985

the following persons were by me united in marriage at

Baltimore, md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **CHRISTOPHER REID SHEEHAN**Age **25**Birthplace **MD.**  
(State)Groom's  
Residence **ALEXANDRIA, VIRGINIA**Marital Status **SINGLE**Bride's  
Name **ELIZABETH ANN HANSON**Age **24**Birthplace **MD.**  
(State)Bride's  
Residence **309 CHAPELWOOD LN. BALTO.CO., MD**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **NOV. 29,**

85

W. N. McReachie

Name of Officiating Clergy or Authorized Officer

Priest Episcopal

Title and Religious Denomination or Office

24. W. Saratoga 21201

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 1 21985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45417

# Certificate of Marriage

State of Maryland

LICENSE NO.  
131228

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL BERNARD SIMMONS**

Age **24** Birthplace **N.J.**  
(State)

Groom's Residence **7027 MC CLEAN BLVD.**

Marital Status **SINGLE**

Bride's Name **MARIE THERESA WEST**

Age **22** Birthplace **MD.**  
(State)

Bride's Residence **7027 MC CLEAN BLVD.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

License Date **DEC. 30**

**85**

**DEPUTY CLERK - CIRCUIT COURT**  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 30 1985**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45418

## Certificate of Marriage

State of Maryland

LICENSE NO.  
131312

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30 day of DEC 9 1985the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

THOMAS J WILKINSON JR

Age 40Birthplace PA.  
(State)Groom's  
Residence

3 PINE WALL PL BALTO CO MD

Marital Status

DIVORCED

Bride's  
Name

ELEANOR S PUTZKER

Age 43Birthplace N Y  
(State)Bride's  
Residence

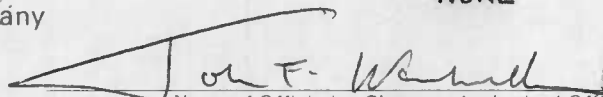
2377 SUNDEW TERR

Marital Status

DIVORCED

NONE

Relationship to groom if any

  
Name of Officiating Clergy or Authorized Officer

License Date

DEC 30 85

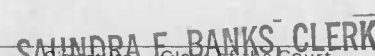
JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 12-30-85License Fee \$ 25.00
  
Sandra E. Banks, Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45419

LICENSE NO.

131091

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOSEPH G PALMIERI

Age 59Birthplace N Y

(State)

Groom's  
Residence

3204 FOSTER AVE

Marital Status

DIVORCED

Bride's  
Name

CATHERINE A MUSOTTO

Age 48Birthplace MD.

(State)

Bride's  
Residence

3204 FOSTER AVE

Marital Status  
NONE

DIVORCED

Relationship to groom if any

JOHN WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 30 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date DEC 2785License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45420

State of Maryland

LICENSE NO.  
131278

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30 day of DEC 9 1985

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ANTHONY W SCHOLLIAN

Age 25 Birthplace MD.  
(State)

Groom's  
Residence

1507 SPRUCE ST

Marital Status SINGLE

Bride's  
Name

SHERRI L AUBIN

Age 18 Birthplace VA  
(State)

Bride's  
Residence

1507 SPRUCE ST

Marital Status SINGLE

Relationship to groom if any

NONE

License Date

DEC 30 85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 1230-85

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45421

State of Maryland

LICENSE NO.  
131286

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH day of DECEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name AVARHAM KRIEF Age 23 Birthplace ISREAL  
(State)  
Groom's Residence 8405 KINGSRIDGE RD. BALTO.CO.,MD. Marital Status SINGLE  
Bride's Name LISA B. ALBIN Age 18 Birthplace MD.  
(State)  
Bride's Residence 8405 KINGSRIDGE RD. BALTO.CO.,MD. Marital Status SINGLE  
Relationship to groom if any NONE

JOHN WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date DEC. 30 85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SANDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45422

## Certificate of Marriage

State of Maryland

LICENSE NO.

131331

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30 day of DEC 9 1985the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

9:49  
Groom's  
Name

GILBERT FLOWERS, JR.

Age 27 Birthplace MD.  
(State)Groom's  
Residence

4005 WABASH AVE.

Marital Status SINGLEBride's  
Name

ANNETTE M. BROWN

Age 25 Birthplace MD.  
(State)Bride's  
Residence

4005 WABASH AVE.

Marital Status SINGLE

Relationship to groom if any

NONE

Name of Officiating Clergy or Authorized Officer

License Date

DEC 30 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 12-30-85License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45423

## Certificate of Marriage

State of Maryland

LICENSE NO.

130993

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27 day of Dec. 9 1985

the following persons were by me united in marriage at

Balto. Md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

HYMAN S SCHWARTZBERG

Age 39

Birthplace

MD.

(State)

Groom's  
Residence

927 S CHARLES ST

Marital Status

SINGLE

Bride's  
Name

JANET L SHIRKEY

Age 31

Birthplace

MD.

(State)

Bride's  
Residence

927 S CHARLES ST

Marital Status

SINGLE

Relationship to groom if any

NONE

Charles Mackey

Name of Officiating Clergy or Authorized Officer

License Date

DEC. 13

85

Deputy Clerk Circuit Court

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-27-85**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45424

## State of Maryland

LICENSE NO.

130937

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 27<sup>th</sup> day of Dec. 9 1985

the following persons were by me united in marriage at

Baltimore, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ANTHONY LOVE GLEEN**

Age **34** Birthplace **MD.**  
(State)

Groom's  
Residence **2102 WOLFE STREET**

Marital Status **SINGLE**

Bride's  
Name **OPHELIA B. HAMMOND**

Age **38** Birthplace **MD.**  
(State)

Bride's  
Residence **2102 WOLFE STREET**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

John F. Wankamill  
Name of Officiating Clergy or Authorized Officer

License Date **DEC. 10,**

85

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

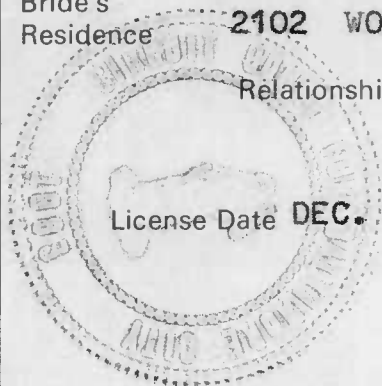
12-27-85

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45425

## Certificate of Marriage

State of Maryland

LICENSE NO.

131191

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27 day of DEC 9 1985the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MARTIN C GORDON

Age 37Birthplace WASH DC  
(State)Groom's  
Residence

18 HUXLEY CIRCLE HARFORD CO MD

Marital Status DIVORCEDBride's  
Name

VIRGINIA E JONES

Age 34Birthplace N CAR  
(State)Bride's  
Residence

18 HUXLEY CIRCLE HARFORD CO MD

Marital Status DIVORCED

Relationship to groom if any

NONE

Name of Officiating Clergy or Authorized Officer

License Date

DEC 27 85

JW

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 12-27-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45426

## State of Maryland

LICENSE NO.

131102

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

I Hereby Certify that on the 27 day of DEC 9 19 85

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

STEPHEN TODD WRIGHT

Age 18 Birthplace MARYLAND  
(State)

Groom's Residence

5495 OAKLAND RD. BALTO. CO., MD.

Marital Status SINGLE

Bride's Name

LISA RENE PRUITT

Age 19 Birthplace VIRGINIA  
(State)

Bride's Residence

4321 ELDONE ROAD

Marital Status SINGLERelationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date

DEC 27

85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 27 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and for-  
warded to the Division of Vital Records, State Depart-  
ment of Health and Mental Hygiene, 201 W. Preston Street,  
Baltimore, MD 21201, upon receipt of page 3, copy of  
Certificate for Clerk of Court.

2

85-45427

## Certificate of Marriage

State of Maryland

LICENSE NO.

130184

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27TH. day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **GREGORY NEIL BOLYARD**Age **34** Birthplace **MD.**  
(State)Groom's  
Residence **6014 EURITH AV.**Marital Status **DIVORCED**Bride's  
Name **SUSAN M. HAGAN**Age **30** Birthplace **MD.**  
(State)Bride's  
Residence **6014 EURITH AV.**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**85 DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

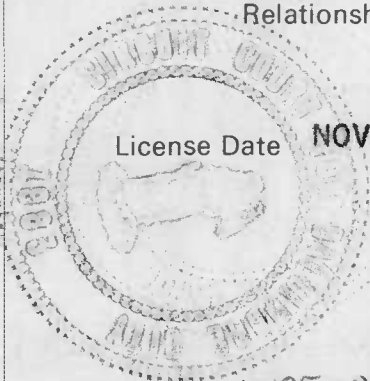
I hereby certify that the above is a true copy of the record filed in this

office on

**SAUNDRA E. BANKS, CLERK****DEC 27 1985**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

85-45428

## State of Maryland

LICENSE NO.

131221

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 27TH. day of DECEMBER <sup>9</sup> 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **HOWARD BERNARD SILVERBERG**Age **68**

Birthplace

**N.C.**

(State)

Groom's

Residence **1825 E. BALTIMORE ST.**Marital Status **WIDOWER**

Bride's

Name **JEANNE FRANCES DRESSER**Age **32**

Birthplace

**IL.**

(State)

Bride's

Residence **1737 E. BALTIMORE ST.**Marital Status **SINGLE**

Relationship to groom if any

**NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

License Date **DEC. 26** **85**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 27 1985**License Fee \$ **25.00****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45429

## Certificate of Marriage

State of Maryland

LICENSE NO.

130370

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27TH. day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ELMER J. CLARK, JR.Age 28 Birthplace MD.  
(State)Groom's Residence 4606 CLAREWAY 21213Marital Status SINGLEBride's Name BRENDA L. MENIKHEIMAge 24 Birthplace MD.  
(State)Bride's Residence 848 WEST 37TH. STREETMarital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date NOV. 7 85DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 27 1985SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45430

LICENSE NO.

130857

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

I Hereby Certify that on the 27th day of Dec. 9 1985

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ANTHONY MICHAEL TAYLOR

Age

29

Birthplace

MD.

(State)

Groom's

Residence

2665 EDMONDSON AVENUE

Marital Status

SINGLE

Bride's

Name

CHRISTINE FRANCES GROSS

Age

30

Birthplace

MD.

(State)

Bride's

Residence

2707 WINCHESTER STREET

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date DEC. 20,

85

John F. Winkelman

Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-27-85

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45431

## State of Maryland

LICENSE NO.

131293

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 30TH day of DECEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **REGINALD A HOWARD**

Age **45** Birthplace **MD.**  
(State)

Groom's Residence **2226 MADISON AVE**

Marital Status **DIVORCED**

Bride's Name **GLORIA J ARTER**

Age **38** Birthplace **N CAR**  
(State)

Bride's Residence **2226 MADISON AVE**

Marital Status **DIVORCED**  
**NONE**

Relationship to groom if any

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **DEC. 30 85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45432

LICENSE NO.

131287

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 30TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

DAVID W SMITH

Age 19

Birthplace

MD.

Groom's Residence

8144 KAVANAGH RD BALTO CO MD

Marital Status

SINGLE

(State)

Bride's Name

THERESA A GOFF

Age 19

Birthplace

MD.

Bride's Residence

8144 KAVANAGH RD BALTO CO MD

Marital Status

SINGLE

(State)

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date DEC. 30

85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SANDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45433

LICENSE NO.

131071

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 30 day of Dec 9 1985

the following persons were by me united in marriage at

Baltimore Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ARTHUR WEATHERBEE**

Age **43**

Birthplace **MD.**  
(State)

Groom's Residence **3602 CALLOWAY AVE**

Marital Status

**DIVORCED**

Bride's Name **ESTHER J SHIELDS**

Age **48**

Birthplace **MD.**  
(State)

Bride's Residence **3602 CALLOWAY AVE**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

License Date **DEC. 19**

**85**

John F. Washburn  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45434

State of Maryland

LICENSE NO.

131233

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RAYMOND W. HOLSTON, JR.** Age **23** Birthplace **MD.**  
(State)Groom's Residence **2799 BERTFOWLER RD. CARROLL CO., MD.** Marital Status **SINGLE**Bride's Name **DESIHA D. CHAVIS** Age **21** Birthplace **MD.**  
(State)Bride's Residence **3908 MARX AVE.** Marital Status **SINGLE**Relationship to groom if any **NONE**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 30 85** **DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 30 1985****SHARDA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45435

## Certificate of Marriage

State of Maryland

LICENSE NO.

131279

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of DECEMBER 9 1985

BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

DAVID B LEE

Age 22

Birthplace

MD.

(State)

Groom's  
Residence

6530 FALKIRK RD BALTO CO MD

Marital Status

SINGLE

Bride's  
Name

CHERYL T CONAWAY

Age 21

Birthplace

MD.

(State)

Bride's  
Residence

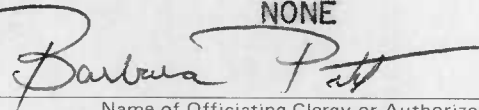
6530 FALKIRK RD BALTO CO MD

Marital Status

SINGLE

Relationship to groom if any

NONE



Name of Officiating Clergy or Authorized Officer

License Date **DEC. 30****85 DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45436

State of Maryland

LICENSE NO.

131127

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 30<sup>th</sup> day of Dec 19 85

the following persons were by me united in marriage at

Bethesda, Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOHN E STOKES 4th

Age

33

Birthplace

MD  
(State)

Groom's  
Residence

2220 WHITTIER AVE

Marital Status

SINGLE

Bride's  
Name

DEIRDRE E. HOOPER

Age

31

Birthplace

MD  
(State)

Bride's  
Residence

1531 SHERWOOD AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date DEC. 19

85

John F. Wankamuth  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45437

## Certificate of Marriage

State of Maryland

LICENSE NO.

131304

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **MICHAEL LEROY HARDING**Age **33**

Birthplace

**MD.**

(State)

Groom's

Residence **5632 CHRYSLER AV.**

Marital Status

**SINGLE**

Bride's

Name **NORMA CHRISTINE PARHAM**Age **26**

Birthplace

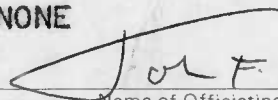
**N.C.**

(State)

Bride's

Residence **4001 KATHLAND AV.**

Marital Status

**SINGLE**Relationship to groom if any **NONE**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 30 85****DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 30 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature of Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45438

## Certificate of Marriage

State of Maryland

LICENSE NO.

130302

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31 day of DEC 9 1985

BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	STANLEY HARVEY	Age	56	Birthplace	MD.
Groom's Residence	5907 WALTHER AVE.	Marital Status	DIVORCED		
Bride's Name	YVONNE MC GOWAN	Age	40	Birthplace	MD.
Bride's Residence	5907 WALTHER AVE.	Marital Status	DIVORCED		
Relationship to groom if any	NONE				

License Date

DEC 31

85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45439

# Certificate of Marriage

## State of Maryland

 LICENSE NO.  
127171

 Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

 I Hereby Certify that on the 31<sup>st</sup> day of Dec. 9 19 85

 the following persons were by me united in marriage at Balt. Md.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's  
Name **ALFRED WILLIAM BROWN, III**

 Age **19** Birthplace **MD.**  
(State)

 Groom's  
Residence **167 N. COLVIN STREET**

 Marital Status **SINGLE**

 Bride's  
Name **YVETTE ANTOINETTE CROWFFEY**

 Age **18** Birthplace **MD.**  
(State)

 Bride's  
Residence **1651 ARGONNE DRIVE**

 Marital Status **SINGLE**

 Relationship to groom if any **NONE**

 License Date **JULY 22** **85**

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

 office on 12-31-85

 License Fee \$ 25<sup>00</sup>
**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45440

## Certificate of Marriage

State of Maryland

LICENSE NO.

131326

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31ST day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	DARREN A COLLINS	Age	20	Birthplace	MD.
				(State)	
Groom's Residence	3410 WILD CHERRY RD BALTO CO MD	Marital Status	SINGLE		
Bride's Name	LISA D WILLIAMS	Age	23	Birthplace	MD.
				(State)	
Bride's Residence	5224 KELWAY RD	Marital Status	SINGLE		
Relationship to groom if any	NONE				

JOHN WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 31 1985  
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45441

LICENSE NO.

131187

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31ST day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CLIFFORD

R.

MEYERS

Age

42

Birthplace

OHIO

(State)

Groom's  
Residence

10 AIRWAY CIR. APT. 3A BALTO.CO.,MD.

Marital Status

DIVORCED

Bride's  
Name

CATHERINE

D.

KINNEAR

Age

32

Birthplace

MD.

(State)

Bride's  
Residence

10 AIRWAY CIR. APT. 3A BALTO.CO.,MD.

Marital Status

SINGLE

Relationship to groom if any NONE

john f.wankmiller

Name of Officiating Clergy or Authorized Officer

License Date

DEC 27 85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 31 1985

License Fee \$

25.00

Signature — Clerk of the Court

SAUNDRA E. BANKS, CLERK

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45442

LICENSE NO.

131161

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 31 day of Dec 9 1985

the following persons were by me united in marriage at Baltim. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DWIGHT DAVID, LEASE**

Age **30** Birthplace **MD.**  
(State)

Groom's Residence **1105 S. CAREY STREET**

Marital Status **DIVORCED**

Bride's Name **BARBARA ANN FELLERS**

Age **35** Birthplace **MD.**  
(State)

Bride's Residence **1105 S. CAREY STREET**

Marital Status **WIDOW**

Relationship to groom if any **NONE**

License Date **DEC. 24 85**

J. F. Wankmiller  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 12-31-85

**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45443

## Certificate of Marriage

State of Maryland

LICENSE NO.  
131328

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31<sup>st</sup> day of Dec. 9 1985the following persons were by me united in marriage at Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **BRUCE CARLTON SUTER**Age **28** Birthplace **MD.**  
(State)Groom's  
Residence **123 S. GILMOREST.**Marital Status **DIVORCED**Bride's  
Name **ALMA HOPE GIBSON**Age **26** Birthplace **N.J.**  
(State)Bride's  
Residence **123 S. GILMOR ST.**Marital Status **SINGLE**Relationship to groom if any **NONE**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 30****85**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 12-31-85License Fee \$ 25.00

Signature — Clerk of the Court

**SAUNDRA E. BANKS, CLERK**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45444

LICENSE NO.

130670

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31 day of DEC 9 1985

BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JAMES

BRACEY

Age

46

Birthplace

S. CAR.

(State)

Groom's  
Residence

816

N.

FREMONT

AVE.

Marital Status

SINGLE

Bride's  
Name

GLORIA

D.

GANTT

Age

29

Birthplace

ALA.

(State)

Bride's  
Residence

1902

E.

29TH.

ST.

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date

DEC 31

85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00

12-31-85  
SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45445

State of Maryland

LICENSE NO.

131327

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31ST day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

JOHN E. WALKER

Age 29

Birthplace

VA.  
(State)

Groom's

Residence

2109 HOLLINS ST.

Marital Status

SINGLE

Bride's

Name

LORNA DEE JONES

Age 19

Birthplace

MD.  
(State)

Bride's

Residence

2109 HOLLINS ST.

Marital Status

SINGLE

Relationship to groom if any NONEJOHN WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK- CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 31 1985  
SAUNDRA E. BANKS, CLERKLicense Fee-\$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45446

LICENSE NO.

131217

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31ST day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name DAVID L. EVANS Age 27 Birthplace MD.  
(State)  
Groom's Residence 8188 MIDHAVEN RD. BALTO.CO.,MD. Marital Status SINGLE  
Bride's Name CATHERINE M. BAHR Age 22 Birthplace MD.  
(State)  
Bride's Residence 12139 MT. ALBERT RD. HOWARD CO.,MD. Marital Status SINGLE  
Relationship to groom if any NONE

License Date DEC. 31 85

john f. wankmiller  
Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 31 1985

SAUNDRA E. BANKS, CLERK  
Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45447

LICENSE NO.

131285

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31ST day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **JOHN A. YOUNG**

Age **24** Birthplace **MD.**  
(State)

Groom's  
Residence **2730 MILES AV.**

Marital Status **DIVORCED**

Bride's  
Name **DEBRA L. REBHAN**

Age **22** Birthplace **MD.**  
(State)

Bride's  
Residence **2730 MILES AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 31 85**

**DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

**JW**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45448

LICENSE NO.

131329

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 31 day of DEC 9 1985

BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOSEPH L. ADDICKS

Age 24

Birthplace

MD.  
(State)

Groom's  
Residence

427 HORNEL ST.

Marital Status SINGLE

Bride's  
Name

DEBRA LYNN MARPLE

Age 22

Birthplace

MD.  
(State)

Bride's  
Residence

427 HORNEL ST.

Marital Status DIVORCED

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date

DEC 31 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 31 1985

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45449

## Certificate of Marriage

State of Maryland

LICENSE NO.

131245

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30TH day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **KEVIN O'NEIL WEST**Age **21** Birthplace **MD.**  
(State)Groom's  
Residence **3934 OAKFORD AV.**Marital Status **SINGLE**Bride's  
Name **CHANTE DANAYE JONES**Age **19** Birthplace **MD.**  
(State)Bride's  
Residence **4610 WALLINGTON AV.**Marital Status **SINGLE**Relationship to groom if any **NONE****BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 30** **85****DEPUTY CLERK- CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ **25.00****SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45450

LICENSE NO.

131269

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 30 day of DEC 9 1985

BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **ARNOLD PETER WEISS**Age **25** Birthplace **N Y**  
(State)

Groom's

Residence **8000 RIDER AV. BALTO.CO.,MD**Marital Status **SINGLE**

Bride's

Name **YVONNE STUY**Age **29** Birthplace **HOLLAND**  
(State)

Bride's

Residence **8000 RIDER AV. BALTO.CO.,MD**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date

**DEC 30 85****JW**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

**DEC 30 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45451

## State of Maryland

 LICENSE NO.  
131300

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 30TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's  
Name

GREGORY M. SMITH

 Age 218 Birthplace (State) MD.

 Groom's  
Residence

1717 REGISTER ST.

 Marital Status SINGLE

 Bride's  
Name

JUANITA MARIE SHEPPARD

 Age 17 Birthplace (State) MD.

 Bride's  
Residence

216 E. 22ND ST.

 Marital Status SINGLE

 Relationship to groom if any NONE

 License Date DEC. 30 85

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

 License Fee \$ 25.00
DEC 30 1985  
SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45452

## Certificate of Marriage

State of Maryland

LICENSE NO.

129897

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31ST day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID WILLIAMS** Age **26** Birthplace **MD.**  
 Groom's Residence **7416 LEXHAM CT. BALTO.CO., MD.** Marital Status **DIVORCED**  
 Bride's Name **SABRINA BUTLER** Age **24** Birthplace **N.Y.**  
 Bride's Residence **7416 LEXHAM CT. BALTO.CO., MD.** Marital Status **SINGLE**  
 Relationship to groom if any **NONE**

License Date **DEC. 31**

85

  
 Name of Officiating Clergy or Authorized Officer  
**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **DEC 31 1985**License Fee \$ 25.00
**SABRINA E. BANKS, CLERK**  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45453

State of Maryland

LICENSE NO.

51761

Copy for State Department of Health and Mental Hygiene  
BALTIMORE CITY (30)I Hereby Certify that on the 17 day of DEC 9 19 85the following persons were by me united in marriage at BALTO MD

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ANTONIO M MAZOS

Age 43

Birthplace

WYOMING

(State)

Groom's  
Residence

617 S BRANFORD ST

Marital Status

DIVORCED

Bride's  
Name

BRENDA A MUSE

Age 33

Birthplace

MD.

(State)

Bride's  
Residence

617 S BRANFORD ST

Marital Status

DIVORCED

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergyman or Authorized Officer

License Date

DEC 17 85

JW DUP LIC 129797 -F

DEPUTY CLERK CIRCUIT COURT

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 17 1985

License Fee - Resident \$  
Non-Resident \$

Signature-Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 301 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45454

LICENSE NO.

131068

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 17TH. day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **WILLIS E. JONES**

Age **42** Birthplace **JAMAICA**  
(State)

Groom's  
Residence **2722 GATEHOUSE DRIVE**

Marital Status **DIVORCED**

Bride's  
Name **MARCIA G. MAIS**

Age **32** Birthplace **JAMAICA**  
(State)

Bride's  
Residence **2722 GATEHOUSE DRIVE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

License Date **DEC.17 85**

Name of Officiating Clergy or Authorized Officer  
**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45455

LICENSE NO.

130921

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD. (or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ALBERT M. MLYNSKI**

Age **37** Birthplace **MD.**  
(State)

Groom's Residence **736 S. CURLEY STREET JR.**

Marital Status **SINGLE**

Bride's Name **JANICE S. ANDERSON**

Age **34** Birthplace **WI.**  
(State)

Bride's Residence **736 S. CURLEY STREET**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 17, 85**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 17 1985**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ **25.00**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45456

## Certificate of Marriage

State of Maryland

LICENSE NO.

131038

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 17 day of DEC 9 1985the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name WENDELL E. MOOREAge 33 Birthplace MD.  
(State)Groom's Residence 6053 MARQUETTE RD.Marital Status DIVORCEDBride's Name ANTHONETTE E. WESTAge 31 Birthplace MD.  
(State)Bride's Residence 6053 MARQUETTE RD.Marital Status SINGLERelationship to groom if any NONEJOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date

DEC 17 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on

DEC 17 1985  
SAUNDRA E. BANKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45457

## State of Maryland

LICENSE NO.

130909

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 17TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MELVIN GARRISON

Age 32

Birthplace

MD.  
(State)

Groom's  
Residence

1618 E 25TH ST

Marital Status

DIVORCED

Bride's  
Name

MARTHA L AUTRY

Age 29

Birthplace

MD.  
(State)

Bride's  
Residence

1618 E 25TH ST

Marital Status

SINGLE

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 17 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date DEC 11 85

JW

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45458

State of Maryland

LICENSE NO.

131029

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16<sup>th</sup> day of Dec. 1985

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **ROBERT DONALD WEBSTER, SR**Age **36**

Birthplace

**MD.**

(State)

Groom's

Residence **407 S. ANGLESEA ST.**Marital Status **WIDOWER**

Bride's

Name **JANET RUTH THOMAS**Age **21**

Birthplace

**MD.**

(State)

Bride's

Residence **334 S. LEHIGH ST.**Marital Status **SINGLE**Relationship to groom if any **NONE**License Date **DEC. 13**

85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00**SAUNDRA E. RANKS, CLERK**  
Signature

Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45459

State of Maryland

LICENSE NO.

130052

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16<sup>th</sup> day of Dec. 9 1985

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **JAMES THOMAS MANLEY**Age **42** Birthplace **KENTUCKY**  
(State)Groom's  
Residence **222 N. GLOVER STREET**Marital Status **WIDOWER**Bride's  
Name **DORIS KRISHER**Age **50** Birthplace **MARYLAND**  
(State)Bride's  
Residence **222 N. GLOVER STREET**Marital Status **DIVORCED**Relationship to groom if any **NONE**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 17 85**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-16-95  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 35.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and for-  
warded to the Division of Vital Records, State Depart-  
ment of Health and Mental Hygiene, 201 W. Preston Street,  
Baltimore, MD 21201, upon receipt of page 3, copy of  
Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45460

LICENSE NO.

130995

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 16TH day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

JOHN P GARCIA

Age 18

Birthplace

MD.

(State)

Groom's Residence

2642 HUDSON ST

Marital Status

SINGLE

Bride's Name

MILDRED L CHURCH

Age 18

Birthplace

MD.

(State)

Bride's Residence

835 S LAKEWOOD AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

BARBARA ANN PITT

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 16 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Date DEC. 12 85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45461

State of Maryland

LICENSE NO.

131080

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 16th day of DECEMBER 9 1985the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name RALPH N. GATHERRIGHTAge 46 Birthplace GEORGIA  
(State)Groom's Residence 7116 PARK HEIGHTS AVENUEMarital Status DIVORCEDBride's Name DESIREE E. GOODMANAge 26 Birthplace MARYLAND  
(State)Bride's Residence 1624 N. WASHINGTON STREETMarital Status SINGLERelationship to groom if any NONEBarbara Pitt

Name of Officiating Clergy or Authorized Officer

License Date DEC. 16 85DEP. CLK.-CIRCUIT COURT OF BALTO.CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 16 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45462

## State of Maryland

LICENSE NO.  
131089

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

I Hereby Certify that on the 18<sup>th</sup> day of Dec 1985

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RONALD LESLIE GILMORE**

Age **36** Birthplace **MD.**  
(State)

Groom's Residence **2300 TERRAFIRMA RD.**

Marital Status **SINGLE**

Bride's Name **DONNA MARIE HOLLEY**

Age **23** Birthplace **MD.**  
(State)

Bride's Residence **2300 TERRAFIRMA RD.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

J. F. Wankam

Name of Officiating Clergy or Authorized Officer

License Date **DEC 18 85**

Duffy Clerk Circuit Court  
Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-19-85  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45463

LICENSE NO.

131156

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOHN GLENN ZIEGLER**

Age **21** Birthplace **MD.**  
(State)

Groom's Residence **3100 STAFFORD ST.**

Marital Status **SINGLE**

Bride's Name **THERESA MARIE SHUGARS**

Age **18** Birthplace **MD.**  
(State)

Bride's Residence **3100 STAFFORD ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 20 85**

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 20 1985**

License Fee \$ 25.00

**SABRINA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45464

LICENSE NO.

131057

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>CHARLES RICHARD LINDSAY</b>	Age	<b>19</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>1719 BELT ST.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>MICHELE LYNN MOSCA</b>	Age	<b>19</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>1719 BELT ST.</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**

**BARBARA PITT**

License Date **DEC. 20 85** **DEPUTY CLERK-CIRCUIT COURT**  
Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 20 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45465

LICENSE NO.  
131008

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>JOHN D. HILLIS, JR.</b>	Age	<b>44</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>4216 MORRISON CT.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>MARIAN R. RAGLAND</b>	Age	<b>44</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>4216 MORRISON CT.</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any	<b>NONE</b>				

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 20, 85**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

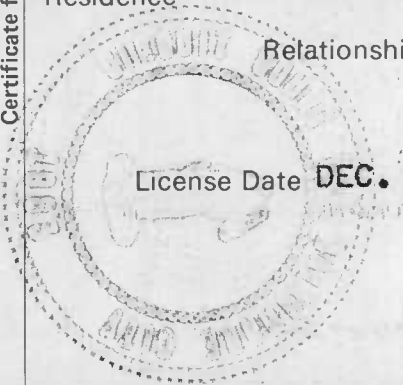
**DEC 20 1985**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45466

## State of Maryland

LICENSE NO.

131138

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 19 day of DEC 9 19 85

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name RONALD SAUNDERSAge 24 Birthplace MD  
(State)

Groom's

Residence 1101 DEMARCAY WAY.Marital Status SINGLE

Bride's

Name JOYCE ANN FULGHAMAge 20 Birthplace MD  
(State)

Bride's

Residence 1101 DEMARCAY WAY.Marital Status SINGLE

Relationship to groom if any NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date DEC 19 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 19 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45467

LICENSE NO.  
131054

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LEONIDAS BOUTSIKARIS**

Age **26** Birthplace **GREECE**  
(State)

Groom's Residence **3003 N CHARLES ST**

Marital Status **SINGLE**

Bride's Name **MARY PERANTONAKIS**

Age **25** Birthplace **MD.**  
(State)

Bride's Residence **9416 WOODLAND DR MONT CO MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 16 85**

**DEPUTY CLERK - CIRC UIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 19 1985**

**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45468

## State of Maryland

LICENSE NO.

131100

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**JUNIOR A STANBURY**Age **27**

Birthplace

**JAMAICA**

(State)

Groom's  
Residence**2417 EUTAW PL**

Marital Status

**SINGLE**Bride's  
Name**BENITA G ANTHONY**Age **37**

Birthplace

**N.Y.**

(State)

Bride's  
Residence**2417 EUTAW PL**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 18 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

**JW**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45469

## Certificate of Marriage

State of Maryland

LICENSE NO.

131122

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 19<sup>th</sup> day of Dec. 9 1985

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

EMMETT R.W. GOLDSBOROUGH

Age 18

Birthplace MD.  
(State)Groom's  
Residence

9609 ORPIN RD BALTO CO MD

Marital Status SINGLE

Bride's  
Name

KAREN S SOWERS

Age 20

Birthplace MD.  
(State)Bride's  
Residence

9609 ORPIN RD BALTO CO MD

Marital Status SINGLE

Relationship to groom if any

NONE

License Date

DEC 19

85

John F. Wankmiller  
Name of Officiating Clergy or Authorized OfficerDistrict Clerk Circuit Court  
Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-19-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

85-45470

## Certificate of Marriage

State of Maryland

LICENSE NO.

131036

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 19TH day of DECEMBER 9 1985the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **BOBBY JONES**Age **23**

Birthplace

**MD.**  
(State)

Groom's

Residence **1903 RICHGLEN RD. BALTO.CO.,MD**

Marital Status

**SINGLE**

Bride's

Name **LYLLYN HARRIS**Age **32**

Birthplace

**MD.**  
(State)

Bride's

Residence **3913 PARKVIEW AV.**

Marital Status

**SINGLE**Relationship to groom if any **NONE****BARBARA JEAN PITT**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 19****85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 19 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45471

LICENSE NO.  
131096

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19TH day of DECEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **LARRY M. HARDY**

Age **28** Birthplace **N. CAROLINA**  
(State)

Groom's  
Residence **3535 VIRGINIA AVENUE**

Marital Status **SINGLE**

Bride's  
Name **SYLVIA WATSON**

Age **25** Birthplace **MARYLAND**  
(State)

Bride's  
Residence **3535 VIRGINIA AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BARBARA JEAN PITT**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 19**

**85**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45472

## Certificate of Marriage

State of Maryland

LICENSE NO.

131088

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 19th day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **HENRY MCARTHUR, SR**Age **44** Birthplace **MD.**  
(State)Groom's Residence **2003 SWANSEA RD.**Marital Status **DIVORCED**Bride's Name **TUESICA IRBY**Age **35** Birthplace **VA.**  
(State)Bride's Residence **426 WHITWOOD AV.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 18,****85 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

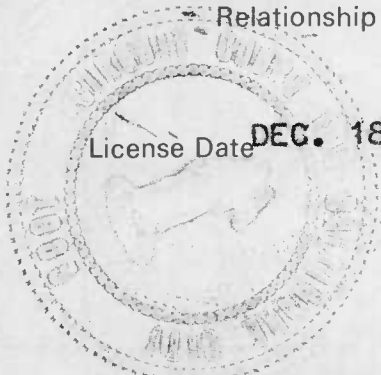
office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45473

LICENSE NO.

131129

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19TH day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **HOWARD LLOYD HAMLIN, JR**Age **27**

Birthplace

**MD.**

(State)

Groom's

Residence **3202 ST. AMBROSE AV.**Marital Status **SINGLE**

Bride's

Name **DEBORAH ANN HILTON**Age **30**

Birthplace

**MD.**

(State)

Bride's

Residence **4610 WALLINGTON AV.**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 19****85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 19 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45474

## State of Maryland

LICENSE NO.

131128

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 19TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ALI FIKRI BAKIR

Age 23 Birthplace ANKARA  
(State)

Groom's Residence 110 W. 39th STREET

Marital Status SINGLE

Bride's Name DIANE LYNN KRAFT

Age 20 Birthplace ILLINOIS  
(State)

Bride's Residence 110 W. 39th STREET

Marital Status DIVORCED

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 19, 85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

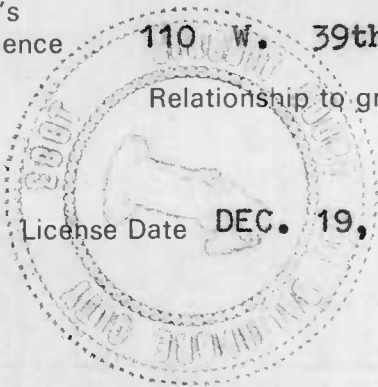
office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45475

LICENSE NO.

130653

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 18 day of DEC 9 1985

BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MATTHEW F. WELSH

Age 42 Birthplace MD.  
(State)Groom's  
Residence

715 S. BOND STREET

Marital Status DIVORCEDBride's  
Name

TRACY I. HENDERSON

Age 28 Birthplace FL.  
(State)Bride's  
Residence

715 S. BOND STREET

Marital Status DIVORCED

Relationship to groom if any

NONE

License Date

DEC 18 85

Name of Officiating Clergy or Authorized Officer.

Title and Religious Denomination or Office  
DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-18-85  
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45476

LICENSE NO.  
131020

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALITMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MAURICE L HALL

Age 26

Birthplace MD.  
(State)

Groom's  
Residence

5205 FRANKFORD AVE

Marital Status

**SINGLE**

Bride's  
Name

CYNTHIA JOHNSON

Age 24

Birthplace MD.  
(State)

Bride's  
Residence

5205 FRANFORD AVE

Marital Status  
**NONE**

Relationship to groom if any

BARBARA J. PITT

Name of Officiating Clergy or Authorized Officer

License Date

**DEC 13**

**85**

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

25.00

**SAUNDRA E. BANKS, CLERK**  
Clerk of the Court

**DEC 18 1985**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45477

LICENSE NO.

131069

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18TH day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LENNY MICHAEL FRIEDMAN**

Age **31** Birthplace **MD.**  
(State)

Groom's Residence **3226 SHELBURNE RD.**

Marital Status **DIVORCED**

Bride's Name **CAROL LYNN DAVIS**

Age **30** Birthplace **MD.**  
(State)

Bride's Residence **3226 SHELBURNE RD.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON-**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 18TH** **85**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination of Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

DEC 18 1985

**SANDRA E. BANKS, CLERK**

2

85-45478

## Certificate of Marriage

State of Maryland

LICENSE NO.  
131110

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18TH. day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MICHAEL J WENCZKOWSKI

Age 21

Birthplace MD.  
(State)Groom's  
Residence

251 S CONKLIN ST

Marital Status

SINGLE

Bride's  
Name

SANDRA M BREEDEN

Age 18

Birthplace MD.  
(State)Bride's  
Residence

251 S CONKLING ST

Marital Status  
NONE

SINGLE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

License Date DEC. 18, 85

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 18 1985  
SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45479

## Certificate of Marriage

State of Maryland

LICENSE NO.

131061

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 18TH. day of DECEMBER 1985

BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KENNY POLLARD**Age **34** Birthplace **TRINIDAD**  
(State)Groom's Residence **3906 ERDMAN AVENUE**Marital Status **DIVORCED**Bride's Name **BEENA SOODEEN**Age **27** Birthplace **TRINIDAD**  
(State)Bride's Residence **3906 ERDMAN AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 16 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45480

## State of Maryland

 LICENSE NO.  
131106

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 18 day of DEC 9 19 85

 the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's Name **RASHEED AJIBADE HASSAN**

 Age **29** Birthplace **NIGERIA**  
(State)

 Groom's Residence **5008 GOODNOW RD.**

 Marital Status **DIVORCED**

 Bride's Name **PAMELA DENISE CARTER**

 Age **26** Birthplace **MD.**  
(State)

 Bride's Residence **5008 GOODNOW RD.**

 Marital Status **SINGLE**

Relationship to groom if any

**NONE**
**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date

**DEC 18 85**
**JW**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 18 1985**

 License Fee \$ 25.00
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45481

State of Maryland

LICENSE NO.  
131044

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18TH. day of DECEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

**MARSHALL D. MOORE**

Age **27**

Birthplace

**MD.**

(State)

Groom's

Residence

**2015 E. BELVEDERE AV.**

Marital Status

**SINGLE**

Bride's

Name

**GWENDOLYN L. TILLMAN**

Age **39**

Birthplace

**MD.**

(State)

Bride's

Residence

**2015 E. BELVEDERE AV.**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 18 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45482

State of Maryland

LICENSE NO.  
131012

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 18TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	ROBERT F. MITCHELL	Age	31	Birthplace	MD.
				(State)	
Groom's Residence	1727 LETITIA AVE.	Marital Status	DIVORCED		
Bride's Name	IDA M. MCGUIRE	Age	27	Birthplace	MD.
				(State)	
Bride's Residence	1727 LETITIA AVE.	Marital Status	DIVORCED		
Relationship to groom if any	NONE				

License Date **DEC. 18 85**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 18 1985**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and for-  
warded to the Division of Vital Records, State Depart-  
ment of Health and Mental Hygiene, 201 W. Preston Street,  
Baltimore, MD. 21201, upon receipt of page 3, copy of  
Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45483

## State of Maryland

LICENSE NO.

130941

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 9TH day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ALAN D. BUTLER

Age

24

Birthplace

MD

(State)

Groom's  
Residence

403 RANDOM RD

Marital Status

SINGLE

Bride's  
Name

MICHELE HARROD

Age

29

Birthplace

MD.

(State)

Bride's  
Residence

2605 W FAYETTE ST

Marital Status

SINGLE

NONE

Relationship to groom if any

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date

DEC. 9

85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 9 1985

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45484

LICENSE NO.

131209

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 27<sup>th</sup> day of Dec. 9 1985

the following persons were by me united in marriage at

Balt. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**JOSEPH E. LA FRANCE**

Age **23**

Birthplace

**CALIFORNIA**

(State)

Groom's  
Residence

**122 N. CURLEY STREET**

Marital Status

**SINGLE**

Bride's  
Name

**KELLY LYNN GOLIGHTLY**

Age **19**

Birthplace

**VIRGINIA**

(State)

Bride's  
Residence

**122 N. CURLEY STREET**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**

License Date

**DEC. 23,**

**85**

Name of Officiating Clergy or Authorized Officer

and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-27-85

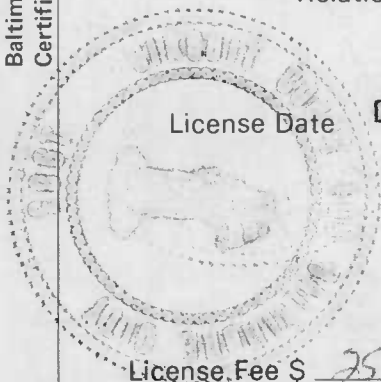
**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$

25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45485

LICENSE NO.

131216

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 27TH. day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **KEVIN O'ROURKE**

Age **25** Birthplace **ILL.**  
(State)

Groom's  
Residence **9512 PARK AVE. P.G. CO., MD.**

Marital Status **SINGLE**

Bride's  
Name **EDNA E. CLOUGH**

Age **23** Birthplace **MD.**  
(State)

Bride's  
Residence **4218 MORRISON CT.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 27, 85**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 27 1985**

License Fee \$ 25.02

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45486

## State of Maryland

LICENSE NO.

131213

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 27TH day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **WILLIAM ROBERT WORKMAN**Age **25** Birthplace **MD.**  
(State)

Groom's

Residence **919 JACK ST. A.A.CO., MD**Marital Status **SINGLE**

Bride's

Name **LENA ELIZABETH EMRICH**Age **25** Birthplace **MD.**  
(State)

Bride's

Residence **919 JACK ST. A.A.CO., MD**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 27, 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

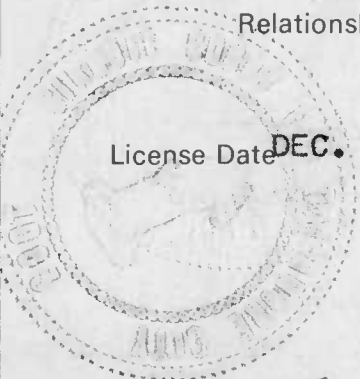
CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

**SAUNDRA E. BANKS, CLERK**  
 Signature — Clerk of the Court
License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

85-45487

State of Maryland

LICENSE NO.

131244

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 26 day of Dec 9 85

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **LEWIS GLENN MC CONNELL**

Age

**22**

Birthplace

**MD.**  
(State)

Groom's

Residence **1632 GRAY PL. BALTO. CO., MD.**

Marital Status

**SINGLE**

Bride's

Name **KATHLEEN MICHELE KAHLER**

Age

**21**

Birthplace

**MD.**  
(State)

Bride's

Residence **3433 WALLFORD DR. BALTO. CO., MD.**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

License Date

**DEC 26****85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-26-85

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**  
Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45488

LICENSE NO.

131256

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 27TH day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **MAURICE THROWER**Age **27** Birthplace **MD.**  
(State)

Groom's

Residence **1008 N. PAYSON STREET**Marital Status **SINGLE**

Bride's

Name **REBECCA M. COLE**Age **25** Birthplace **WASHINGTON**  
(State)

Bride's

Residence **1008 N. PAYSON STREET**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 27 85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 27 1985**  
**SABRINA E. BARKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45489

## Certificate of Marriage

State of Maryland

LICENSE NO.

131218

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27TH. day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **EDWARD POWELL, JR.**Age **23** Birthplace **MD.**

(State)

Groom's  
Residence **2228 CALLOW AVE.**

Marital Status

**SINGLE**Bride's  
Name **MARSCHELL LAMBERT**Age **21** Birthplace **MD.**

(State)

Bride's  
Residence **2228 VCALLOW AVE.**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 27, 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**DEC 27 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45490

## Certificate of Marriage

State of Maryland

LICENSE NO.

131074

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27TH day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CORNELL F DAVIS

Age 39

Birthplace MD.  
(State)Groom's  
Residence

1370 N STRICKER ST

Marital Status

SINGLE

Bride's  
Name

ROSALAND B COLE

Age 47

Birthplace MD.  
(State)Bride's  
Residence

3406 W MULBERRY ST

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

License Date DEC. 16 85

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 27 1985

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45491

## Certificate of Marriage

State of Maryland

LICENSE NO.  
131162

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27TH day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD,  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **William F. Wagner**Age **28** Birthplace **Md.**  
(State)Groom's  
Residence **1405 COOKSIE STREET**Marital Status **SINGLE**Bride's  
Name **ROBIN S. SCHAUTZ**Age **24** Birthplace **N.J.**  
(State)Bride's  
Residence **1537 S. CHARLES STREET**Marital Status **SINGLE**Relationship to groom if any **None**License Date **DEC 23**85 **DEPUTY CLERK-CIRCUIT COURT**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 27 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45492

## Certificate of Marriage

State of Maryland

LICENSE NO.

131143

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27 day of DEC 9 1985the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>RICHARD L. RITTER</b>	Age	<b>27</b>	Birthplace	<b>N. CAR.</b>
				(State)	
Groom's Residence	<b>4753 WEST LAND BLVD. BALTO.CO.,MD.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>LISA S. WOODHOUSE</b>	Age	<b>20</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>8307 HILMAR CT. BALTO.CO.,MD.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 27 85****JW**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 27 1985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45493

## Certificate of Marriage

State of Maryland

LICENSE NO.

131220

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 27TH. day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	DANIEL P. TODES	Age	33	Birthplace	MD.
Groom's Residence	2406 BRIARWOOD RD.	Marital Status	DIVORCED		
Bride's Name	SHELBY J. MORGAN	Age	36	Birthplace	MO.
Bride's Residence	2406 BRIARWOOD RD.	Marital Status	SINGLE		

(State)

(State)

Relationship to groom if any NONE

Joan C. Anderson  
Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

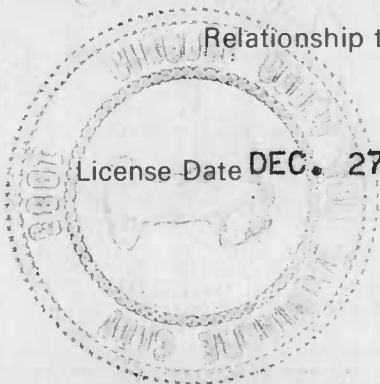
office on

SAUNDRA E. BANKS, CLERK  
12-27-85

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

85-45494

State of Maryland

LICENSE NO.  
128057

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 30 day of Dec. 9 19 85

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

PHILIP OTTO BUSH, JR.

Age

38

Birthplace

MD.

(State)

Groom's

Residence

6019 WOODCREST AVENUE

Marital Status

SINGLE

Bride's

Name

LULA L. GRAY

Age

34

Birthplace

MD.

(State)

Bride's

Residence

6019 WOODCREST AVENUE

Marital Status

DIVORCED

Relationship to groom if any

NONE

License Date JULY 26,

85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-30-85

SAUNDRA E. BANKS, CLERK

License Fee \$

25<sup>00</sup>

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45495

## State of Maryland

LICENSE NO.

131210

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 23RD day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>SAMUEL J. GRAVES</b>	Age	<b>21</b>	Birthplace	<b>MD.</b>
				(State)	
Groom's Residence	<b>1110 BOND ST.</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>TANIA M. WALKER</b>	Age	<b>22</b>	Birthplace	<b>MD.</b>
				(State)	
Bride's Residence	<b>43 N. PATTERSON PARK AVE. 1ST. FL.</b>	Marital Status	<b>SINGLE</b>		
Relationship to groom if any	<b>NONE</b>				

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 23 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45496

## Certificate of Marriage

State of Maryland

LICENSE NO.

131199

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

STERLING J MC COLLUM

Age

30

Birthplace

N CAR

(State)

Groom's  
Residence

5033 CHILDGROVE AVE

Marital Status

SINGLE

Bride's  
Name

PAMELA D SCOTT

Age

33

Birthplace

N CAR

(State)

Bride's  
Residence

2936 CLIFTON AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date

DEC. 23 85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45497

LICENSE NO.

130977

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 23RD. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	JOSEPH N. LAUER	Age	47	Birthplace	MD.
				(State)	
Groom's Residence	4842 ABERDEEN AVE.	Marital Status	DIVORCED		
Bride's Name	PATRICIA A. MALONE	Age	25	Birthplace	MD.
				(State)	
Bride's Residence	1538 CHARLOTTE AVE.	Marital Status	DIVORCED		
Relationship to groom if any	NONE				

License Date DEC. 23,

85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 23 1985**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45498

## State of Maryland

LICENSE NO.

131094

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 23RD day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD. (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WILLIE EARL BOONE

Age 32 Birthplace N. CAROLINA  
(State)

Groom's  
Residence

1101 ORLEANS STREET

Marital Status SINGLE

Bride's  
Name

LINDA VANESSA ANDERSON

Age 28 Birthplace MARYLAND  
(State)

Bride's  
Residence

1101 ORLEANS STREET

Marital Status SINGLE

Relationship to groom if any

NONE

BARBARA J. PITT

Name of Officiating Clergy or Authorized Officer

License Date DEC. 18 85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination of Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on DEC 23 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45499

LICENSE NO.

130930

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20 day of DEC 9 1985

**BALTO MD**

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PAUL KAISER, JR.**

Age **38** Birthplace **MD.**  
(State)

Groom's Residence **116 RANDALL ST.**

Marital Status **DIVORCED**

Bride's Name **JUDA L. KAISER**

Age **37** Birthplace **W. VA.**  
(State)

Bride's Residence **116 RANDALL ST.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 20 85**

**JW**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on

**DEC 20 1985**

**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45500

State of Maryland

LICENSE NO.  
130888

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 20 day of Dec. 9 1985

the following persons were by me united in marriage at

Balti. Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

MARK T JENSEN

Age

27

Birthplace

MINN

(State)

Groom's  
Residence

3628 EDNOR RD

Marital Status

SINGLE

Bride's  
Name

JEAN M DENNEY

Age

22

Birthplace

WASH DC

(State)

Bride's  
Residence

362 E BELVEDERE AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date DEC. 4

85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-20-85

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45501

## State of Maryland

LICENSE NO.

131123

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 20TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ROBERT L GOMON

Age 34

Birthplace MICH

(State)

Groom's  
Residence

2244 FLEET ST

Marital Status

SINGLE

Bride's  
Name

ELIZABETH A ROBINSON

Age 30

Birthplace MD.

(State)

Bride's  
Residence

2244 FLEET ST

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that this is a true copy of a record filed in this

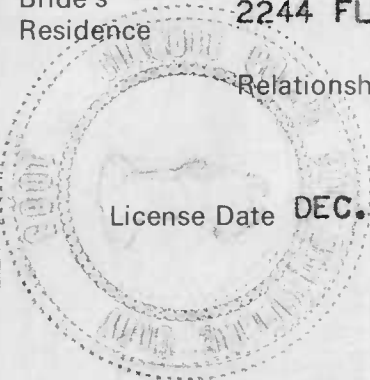
office on

DEC 20 1985

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45502

## Certificate of Marriage

State of Maryland

LICENSE NO.

131084

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20<sup>th</sup> day of Dec 9 1985

the following persons were by me united in marriage at

Balt. Mar  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ARTHUR T. GORDON, JR

Age

42

Birthplace

MD.

(State)

Groom's  
Residence

5904 EDNA AV.

Marital Status **DIVORCED**Bride's  
Name

MARGARET T. WALTERS

Age

42

Birthplace

MD.

(State)

Bride's

Residence 5904 EDNA AV.

Marital Status **DIVORCED**

Relationship to groom if any

NONE

John F. Wabnitz

Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court

Time and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-20-85  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **DEC. 18,**

85

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45503

## State of Maryland

 LICENSE NO.  
130954

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

 I Hereby Certify that on the 20TH. day of DECEMBER 1985

 the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's  
Name **ROYE S. TEMPLETON**

 Age **42** Birthplace **MD.**  
(State)

 Groom's  
Residence **1502 MCCULLOH ST.**

 Marital Status **DIVORCED**

 Bride's  
Name **KIM BOSTOCK**

 Age **28** Birthplace **PA.**  
(State)

 Bride's  
Residence **1502 MCCULLOH ST.**

 Marital Status **SINGLE**

 Relationship to groom if any **NONE**

Name of Officiating Clergy or Authorized Officer

 License Date **DEC. 20,**
**85**
**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

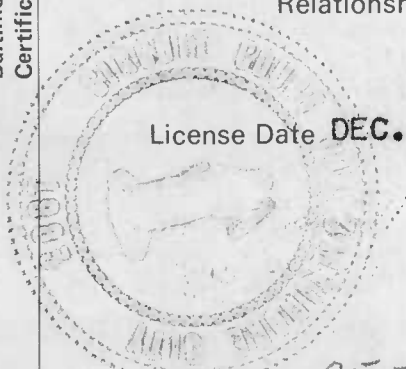
I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 20 1985**

 License Fee \$ 25.00
**SAUNDRA E. BANKS, CLERK**  
 Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45504

LICENSE NO.

131147

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

I Hereby Certify that on the 20 day of DEC 9 1985

BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DWAYNE E. SOMERVILLE**

Age **22** Birthplace **MD.**  
(State)

Groom's Residence **2819 CARVER ROAD**

Marital Status **SINGLE**

Bride's Name **ALANA I. HARRIS**

Age **21** Birthplace **MD.**  
(State)

Bride's Residence **3720 FLOWERTON ROAD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

John F. Wandersell  
Name of Officiating Clergy or Authorized Officer

License Date **DEC 20 85**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on 12-20-85

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45505

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130970

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20 day of DEC 9 19 85the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

JOSEPH C GUTBERLET

Age 30Birthplace MD.  
(State)Groom's  
Residence

925 FOXRIDGE LA BALTO CO MD

Marital Status

DIVORCED

Bride's  
Name

DONNA L PELEKAKIS

Age 35Birthplace MD.  
(State)Bride's  
Residence

925 FOXRIDGE LA BALTO CO MD

Marital Status

DIVORCED

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date DEC 20 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 20 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45506

## Certificate of Marriage

State of Maryland

LICENSE NO.

130958

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20TH. day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name LOUIS EDWARD MADDUX, JRAge 24 Birthplace MD.

(State)

Groom's

Residence 1440 CHESAPEAKE COURT.Marital Status SINGLE

Bride's

Name DONNA LYNN COVINGTONAge 25 Birthplace MD.

(State)

Bride's

Residence 1440 CHESAPEAKE COURT.Marital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 9 85DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 20 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45507

## Certificate of Marriage

State of Maryland

LICENSE NO.  
131140

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20TH. day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name RODERICK JOHN MCGARRIE Age 18 Birthplace GA.  
(State)Groom's Residence 8230 MONTTON RD. A.A.CO., MD Marital Status SINGLEBride's Name DAWN MICHELE CLAXTON Age 18 Birthplace MD.  
(State)Bride's Residence 962 POINT PLEASANT RD. A.A.CO., MD Marital Status SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 20, 85 DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45508

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130808

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 20 day of Dec. 9 19 85

the following persons were by me united in marriage at

Baltimore  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **THOMAS DANIEL WALKER, 3RD**Age **22**

Birthplace

**MD.**  
(State)

Groom's

Residence **1148 WASHINGTON BLVD.**

Marital Status

**SINGLE**

Bride's

Name **RITA MARIE TRIMPER**Age **21**

Birthplace

**MD.**  
(State)

Bride's

Residence **1148 WASHINGTON BLVD.**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**License Date **DEC. 4****85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45509

## State of Maryland

 LICENSE NO.  
131206

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**
*I Hereby Certify* that on the 24TH day of DECEMBER 9 19 85

 the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	WAYNE R. HERRON	Age	21	Birthplace	MD.
				(State)	
Groom's Residence	1515 BUSH ST.	Marital Status	SINGLE		
Bride's Name	THELMA M. HEWARD	Age	19	Birthplace	MD.
				(State)	
Bride's Residence	825 WOODWARD ST.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

 License Date DEC. 24

85

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985
**SAUNDRA E. BANKS, CLERK**

 License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45510

## State of Maryland

 LICENSE NO.  
131022

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**
*I Hereby Certify* that on the 24TH day of DECEMBER 9 19 85

 the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

 Groom's  
Name

RAYMOND L KRAUSE

 Age 38 Birthplace

MD  
(State)

 Groom's  
Residence

25 COACH LA A.A.CO.MD

Marital Status

DIVORCED

 Bride's  
Name

WILMA L SYNODINOS

 Age 41 Birthplace

MD  
(State)

 Bride's  
Residence

25 COACH LA A.A.CO.MD.

Marital Status

NONE

DIVORCED

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

 License Date DEC 13 85
DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 24 1985  
SAUNDRA E. BARRIS, CLERK

 License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45511

## State of Maryland

LICENSE NO.

131201

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23rd day of DECEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name RAYMOND ANTHONY BLACK Age 19 Birthplace MD.  
(State)

Groom's Residence 922 BELNORD AVENUE Marital Status SINGLE

Bride's Name TANYA MARIA THOMAS Age 18 Birthplace MD.  
(State)

Bride's Residence 6083 MARQUETTE RD. BALTO. CO., MD. Marital Status SINGLE

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 23 85 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45512

LICENSE NO.

131113

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23RD. day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

EDWARD H KAISER JR

Age 43 Birthplace MD.  
(State)

Groom's Residence

538 S BENTALOW ST

Marital Status DIVORCED

Bride's Name

GOLDIE M KAIN

Age 40 Birthplace MD.  
(State)

Bride's Residence

538 S BENTALOU ST

Marital Status DIVORCED

NONE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 23, 85DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

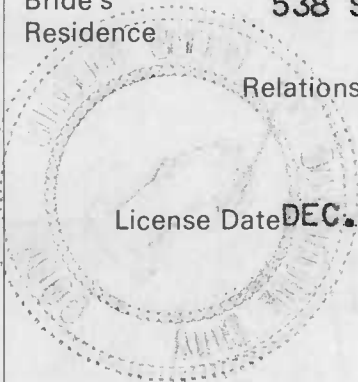
I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45513

LICENSE NO.

131173

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23rd day of DECEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name ELIEZUR SANDINGAge 34 Birthplace PHILIPPINES

(State)

Groom's

Residence 456 LANLEY ROADMarital Status SINGLE

Bride's

Name TERRY D. MINTMIERAge 25 Birthplace MD.

(State)

Bride's

Residence 456 LANLEY ROADMarital Status DIVORCEDRelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 23 85DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45514

LICENSE NO.

129958

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 23RD day of DECEMBER 9 19 85

BALTIMORE CITY

the following persons were by me united in marriage at

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MICHAEL D. MAULTSBY**

Age **22** Birthplace **MD.**  
(State)

Groom's Residence **1607 N. GAY ST.**

Marital Status **SINGLE**

Bride's Name **DOLORES L. BEANE**

Age **20** Birthplace **MD.**  
(State)

Bride's Residence **4019 CHATHAM RD.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **OCT 14 85**

DEPUTY CLERK CIRCUIT COURT BALTO. CITY

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 23 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45515

## State of Maryland

LICENSE NO.

131184

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 23rd day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

PHILIP C GEBBIA

Age 24

Birthplace

MD.

(State)

Groom's Residence

41 S DECKER AVE

Marital Status

SINGLE

Bride's Name

DAWN M PUPEK

Age 20

Birthplace

MD.

(State)

Bride's Residence

41 S DECKER AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

BARBARA PITT

Name of Officiating Clergy or Authorized Officer

License Date DEC. 23

85

DEP. CLK. - CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct copy of a record filed in this

office on

DEC 23 1985

SANDRA E. BANKS, CLERK

License Fee \$

25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45516

## Certificate of Marriage

State of Maryland

LICENSE NO.

131171

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23<sup>rd</sup> day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **GARY D. KING**Age **28** Birthplace **MD.**  
(State)Groom's  
Residence **7 SULKY COURT BALTO. CO., MD.**Marital Status **DIVORCED**Bride's  
Name **CHRISTA OMELCHENKO**Age **32** Birthplace **PA.**  
(State)Bride's  
Residence **7 SULKY COURT BALTO. CO., MD.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 23 85****DEPUTY CLERK - CIRCUIT COURT BALTO, CITY**  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 23 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45517

## Certificate of Marriage

State of Maryland

LICENSE NO.

131021

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 23rd day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name THOMAS M. BOWMANAge 31 Birthplace MD.

(State)

Groom's Residence 1821 LIGHT ST.

Marital Status

DIVORCEDBride's Name PATRICIA A. ALLENAge 25 Birthplace MD.

(State)

Bride's Residence 54 GLENN RIDGE CT. A.A. CO., MD.

Marital Status

SINGLERelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 16 85DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 23 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45518

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130938

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24TH day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name GABINO MORA Age 36 Birthplace MEXICO  
(State)Groom's Residence 37 LOWERGATE CT. BALTO.CO., MD. Marital Status DIVORCEDBride's Name JUANA I. RUIZ Age 22 Birthplace HONDURAS  
(State)Bride's Residence 8420 LUCERNE RD. BALTO.CO., MD. Marital Status SINGLERelationship to groom if any NONETHERESA A. TUTMAN

Name of Officiating Clergy or Authorized Officer

License Date DEC. 23RD. 85 DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on DEC 24 1985License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45519

## State of Maryland

LICENSE NO.

130639

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH day of DECEMBER 9 1985  
BALTIMORE, MD.

the following persons were by me united in marriage at \_\_\_\_\_  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GREGORY F. LUTZ**

Age **33** Birthplace **MD.**  
 (State)

Groom's Residence **942 EXETER HALL AVENUE**

Marital Status **DIVORCED**

Bride's Name **BARBARA A. PARODA**

Age **26** Birthplace **MD.**  
 (State)

Bride's Residence **2233 SENECA RD. BALTO. CO., MD.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**THERESA A. TUTMAN**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 20 85**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

**TT**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45520

State of Maryland

LICENSE NO.  
131188

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH. day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name KEVIN DARNELL LITTLEJOHN Age 24 Birthplace PA.  
(State)

Groom's Residence 1117 N. WOODINGTON ROAD Marital Status SINGLE

Bride's Name CINDER LUE BRYSON Age 24 Birthplace MD.  
(State)

Bride's Residence 1117 N. WOODINGTON ROAD Marital Status SINGLE

Relationship to groom if any NONE

THERESA A. TUTMAN

Name of Officiating Clergy or Authorized Officer

License Date DEC. 24, 85 DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of the original filed in this

office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.01

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45521

LICENSE NO.  
130994

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH. day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **PERCY L. CLAIBORNE**

Age **24** Birthplace **MD.**  
(State)

Groom's Residence **2622 LAURETTA AVE**

Marital Status **SINGLE**

Bride's Name **VANESSA D ISOM**

Age **25** Birthplace **MD.**  
(State)

Bride's Residence **1110 WARWICK AVE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 12 85**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on:

**DEC 24 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45522

LICENSE NO.  
131166

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH. day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>JOHN B SANDERS</b>	Age	<b>38</b>	Birthplace	<b>N.Y.</b> (State)
Groom's Residence	<b>51 COLONY HILL CT BALTO CO MD</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>BARBARA A WILTSHIRE</b>	Age	<b>27</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>51 COLONY HILL CT BALTO CO MD</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any	<b>NONE</b>				

**BARBARA J. PITT**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

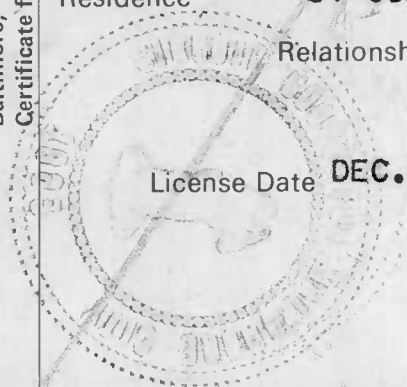
office on

License Fee \$ 25.00

**SANDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

State of Maryland

85-45523

LICENSE NO.  
130956

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH. day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**JEFFREY W BOYD**

Age **40** Birthplace **N.Y.**  
(State)

Groom's  
Residence

**701 CATHDERAL ST**

Marital Status **DIVORCED**

Bride's  
Name

**SUSAN E DREY**

Age **29** Birthplace **IOWA**  
(State)

Bride's  
Residence

**701 CATHDERAL ST**

Marital Status **DIVORCED**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Date **DEC. 20, 85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45524

## Certificate of Marriage

State of Maryland

LICENSE NO.

131169

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24TH. day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **CHRISTOPHER LLOYD HOSPEDALES**Age **20**

Birthplace

**MD.**  
(State)

Groom's

Residence **2603 LAWINA RD.**Marital Status **SINGLE**

Bride's

Name **ELRITA ANTONINA PRITCHETT**Age **20**

Birthplace

**N.C.**  
(State)

Bride's

Residence **2603 LAWINA RD.**Marital Status **SINGLE**

Relationship to groom if any

**NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC.23****85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45525

LICENSE NO.

130861

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DAVID ALLEN WALLACE**

Age **29** Birthplace **WASH., D.C.**  
(State)

Groom's Residence **418-A STARWOOD DR. A.A. CO., MD.**

Marital Status **DIVORCED**

Bride's Name **CORRINE THOMAS**

Age **37** Birthplace **N. CAROLINA**  
(State)

Bride's Residence **4457 OLD FREDERICK ROAD**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6 85**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985**

License Fee \$ 25.00

**SHARON E. BANKS, CLERK**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45526

## Certificate of Marriage

State of Maryland

LICENSE NO.

131153

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 24TH day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

ROBNET L. HINES

Age

24

Birthplace

MD.  
(State)

Groom's

Residence

2713 SEAMON AVENUE

Marital Status

SINGLER

Bride's

Name

SHELLEY R. WOODHOUSE

Age

21

Birthplace

MD.  
(State)

Bride's

Residence

5925 RADECKE AVENUE

Marital Status

SINGLE

Relationship to groom if any NONE

BARBARA JEAN PITT

Name of Officiating Clergy or Authorized Officer

License Date DEC. 24

85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

SAUNDRA E. BARKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45527

## State of Maryland

LICENSE NO.

131211

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 24TH day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	EDWARD M. ROBINSON	Age	21	Birthplace	KANSAS
				(State)	
Groom's Residence	2009 WOODLAWN DR. APT. C BALTO. CO., MD.	Marital Status	SINGLE		
Bride's Name	ANGELA C. THORNE	Age	21	Birthplace	N. CAROLINA
				(State)	
Bride's Residence	2009 WOODLAWN DR. BALTO. CO., MD.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 24 85 DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of the record filed in this

office on

DEC 24 1985  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45528

## State of Maryland

LICENSE NO.

131011

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 24TH day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**HARRY R LAWHORN**Age **31**Birthplace **MD.**Groom's  
Residence**15 HILLTOP RD A.A.CO.MD**

Marital Status

**SINGLE**Bride's  
Name**KIM DENISE BURKHARDT**Age **29**Birthplace **MD.**Bride's  
Residence**15 HILLTOP RD A.A.CO.MD**

Marital Status

**DIVORCED**

Relationship to groom if any

**NONE**JOAN C. ANDERSON-

Name of Officiating Clergy or Authorized Officer

License Date **DEC.24 85**DEPUTY CLERK- CIRCUIT COURT BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 24 1985****SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45529

LICENSE NO.

131248

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

*I Hereby Certify* that on the 26TH day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DANNY CHARLES BATHGATE**

Age **21** Birthplace **MD.**  
(State)

Groom's Residence **4115 AUDREY AVENUE**

Marital Status **SINGLE**

Bride's Name **ERICKA NATALIE SIMMS**

Age **18** Birthplace **MD.**  
(State)

Bride's Residence **4115 AUDREY AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN WANKMILER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 26**

**85 DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 26 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45530

## Certificate of Marriage

State of Maryland

LICENSE NO.  
131072

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 26<sup>th</sup> day of Dec. 9 1985

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

THOMAS S BORKOWSKI

Age 34Birthplace MD.  
(State)Groom's  
Residence

1622 POPLAND ST

Marital Status SINGLEBride's  
Name

ALICE A SCHALK

Age 28 Birthplace MD.  
(State)Bride's  
Residence

1622 POPLAND ST

Marital Status SINGLE

Relationship to groom if any

NONEJean Anderson

Name of Officiating Clergy or Authorized Officer

License Date DEC. 1685Dignity Chh. Caring Court.  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-26-85License Fee \$ 25.00SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45531

State of Maryland

LICENSE NO.

131232

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 26 day of DEC 9 1985

BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

MARIO

E. ALBI

Age

37

Birthplace

MD.

(State)

Groom's Residence

1637

LOCHWOOD

RD.

Marital Status

SINGLE

Bride's Name

KAREN

M.

SLOCKBOWER

Age

31

Birthplace

MD.

(State)

Bride's Residence

1600

BOLTON

ST.

Marital Status

SINGLE

Relationship to groom if any

NONE

License Date

DEC 26 85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-26-85  
SAUNDRA E. BANKS, CLERK

License Fee \$

25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

85-45532

State of Maryland

LICENSE NO.

131167

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 26TH. day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

FRANK WASHINGTON POINT

Age 63

Birthplace

S.C.  
(State)

Groom's

Residence 3424 SUNLEA COURT.

Marital Status WIDOWER

Bride's

Name ORA LEE LANE

Age 49

Birthplace

S.C.  
(State)

Bride's

Residence 3424 SUNLEA COURT.

Marital Status WIDOW

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 24 85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 26 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45533

LICENSE NO.

130467

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 16 day of DEC 9 1985

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name

GEORGE CARLTON JACKSON

Age 38

Birthplace

MD  
(State)

Groom's

Residence

2728 HARLEM AVE.

Marital Status

DIVORCED

Bride's

Name

DANNA LEE LEWIS

Age 33

Birthplace

VA  
(State)

Bride's

Residence

2728 HARLEM AVE.

Marital Status

SINGLE

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date DEC 16 85

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 16 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45534

LICENSE NO.

130826

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 3rd day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**CELESTINE I AMAEFULE**

Age **35** Birthplace **NIGERIA**  
(State)

Groom's  
Residence

**3001 S HANOVER ST**

Marital Status **DIVORCED**

Bride's  
Name

**OKECHUKWU A NWODIM**

Age **30** Birthplace **NIGERIA**  
(State)

Bride's  
Residence

**3001 S HANOVER ST**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**THERESA A. TUTMAN**

Name of Officiating Clergy or Authorized Officer

**DEP. CLK.- CIRCUIT COURT OF BALTO.**

Title and Religious Denomination or Office

License Date **NOV. 29** **85**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 3 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45535

State of Maryland

LICENSE NO.

129102

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 3 day of Dec 9 1985the following persons were by me united in marriage at Balti. Md

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **GEORGE N. CARTER**Age **29**Birthplace **MD.**  
(State)Groom's Residence **1110 DUKELAND ST.**Marital Status **DIVORCED**Bride's Name **MARGIE A. THOMAS**Age **26**Birthplace **MD.**  
(State)Bride's Residence **1110 DUKELAND ST. 2ND.FL.**Marital Status **SINGLE**Relationship to groom if any **NONE**

Name of Officiating Clergyman or Authorized Officer

License Date **SEPT. 3**

85

Title and Religious Denomination or Office

tt

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-3-85License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45536

## Certificate of Marriage

State of Maryland

LICENSE NO.

130881

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 4TH. day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ERNEST L WILLIAMS

Age 54 Birthplace MD.

(State)

Groom's  
Residence

5435 JONQUIL AVE

Marital Status DIVORCEDBride's  
Name

MARJORIE H WILLIAMS

Age 48 Birthplace MD.

(State)

Bride's  
Residence

5435 JONQUIL AVE

Marital Status DIVORCED

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

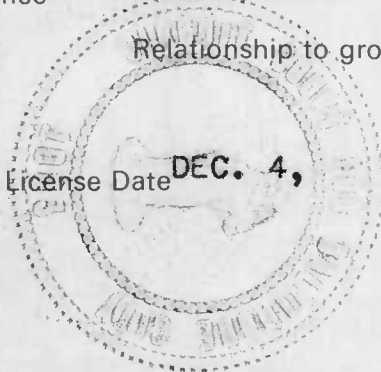
office on

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45537

## Certificate of Marriage

State of Maryland

LICENSE NO.

130871

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 4TH day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RICHARD VINCENT BLACKLEDGE**Age **19** Birthplace **MD.**  
(State)Groom's Residence **4115 PENHURST AV.**Marital Status **SINGLE**Bride's Name **CYNTHIA ANN DANIELS**Age **27** Birthplace **MD.**  
(State)Bride's Residence **4115 PENHURST AV.**Marital Status **SINGLE**

Relationship to groom if any

**NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 4 85****DEPUTY CLK.-CIRCUIT COURT OF BALTO.CITY**

Title and Religious Denomination or Office

**TT**

Address of Clergy or Authorized Officer

**CERTIFICATION OF CLERK OF THE COURT**

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 4 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45538

LICENSE NO.

130685

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 4TH day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name

JOHN LAWRENCE MANCINI

Age 34 Birthplace NEW YORK

(State)

Groom's Residence

146 SANFORD AVE. BALTO. CO., MD.

Marital Status SINGLE

Bride's Name

CATHERINE IRENE METCALF

Age 49 Birthplace MARYLAND

(State)

Bride's Residence

146 SANFORD AVE. BALTO. CO., MD.

Marital Status DIVORCEDRelationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 4 85 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 4 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$

25.00

TT

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45539

State of Maryland

LICENSE NO.

130636

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 4TH. day of DECEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES D. RANDOLPH**

Age **37** Birthplace **VA.**

(State)

Groom's Residence **2108 N. CALVERT ST.**

Marital Status

**SINGLE**

Bride's Name **REGINA K. ADAIR**

Age **38** Birthplace **MD.**

(State)

Bride's Residence **2108 N. CALVERT ST.**

Marital Status

**DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 22 85**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 4 1985

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45540

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130818

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 4TH. day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

RONALD G SMOOT SR

Age 44

Birthplace

MD.

(State)

Groom's  
Residence

728 N LINWOOD AVE

Marital Status

DIVORCED

Bride's  
Name

NELLIE L BOWMAN

Age 43

Birthplace

MD.

(State)

Bride's  
Residence

728 N LINWOOD AVE

Marital Status

DIVORCED

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 3****85 DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 4 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45541

## State of Maryland

LICENSE NO.

130855

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 5th day of DECEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

VERNON B. SANDERS, JR.

Age 26

Birthplace

MD.  
(State)

Groom's  
Residence

3622 SPRINGDALE AV.

Marital Status

SINGLE

Bride's  
Name

ROSALIND MARIEA MC NEILL

Age 21

Birthplace

MD.  
(State)

Bride's  
Residence

3215 ELMORA AV.

Marital Status

SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

License Date **DEC. 2** **85**

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985**  
**SACHINA E. BARRIS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45542

LICENSE NO.

130802

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 5TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**THEODORE M GWYNN**

Age **40**

Birthplace

**MD.**

(State)

Groom's  
Residence

**5 N BERNICE AVE**

Marital Status

**DIVORCED**

Bride's  
Name

**VIOLETTA M PARKER**

Age **41**

Birthplace

**PA.**

(State)

Bride's  
Residence

**4103 RIDGEWOOD AVE**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45543

## Certificate of Marriage

State of Maryland

LICENSE NO.

130828

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6th day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM M CIRIGLIANO**Age **34** Birthplace **MD.**  
(State)Groom's Residence **335 S STRICKER ST**Marital Status **DIVORCED**Bride's Name **SUSAN L GORDON**Age **30** Birthplace **MD.**  
(State)Bride's Residence **1810 DOVER ST**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on **DEC 6 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45544

## Certificate of Marriage

State of Maryland

LICENSE NO.

130890

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 5th day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **WILLIAM FRANK WALLS, JR.**Age **18** Birthplace **MD.**  
(State)

Groom's

Residence **2124 ASHTON STREET**Marital Status **SINGLE**

Bride's

Name **SHERRIE LYNN NUCKLES**Age **16** Birthplace **MD.**  
(State)

Bride's

Residence **2124 ASHTON STREET**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 5 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985**  
**SANDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45545

## Certificate of Marriage

State of Maryland

LICENSE NO.

130591

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 5TH. day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **JOHN WESLEY THOMPSON**Age **33**

Birthplace

**N.C.**

(State)

Groom's

Residence **5118 FREDCREST RD. BALTO. CO., MD.** Marital Status **SINGLE**

Bride's

Name **RENEE E. MC CLAIN**Age **29**

Birthplace

**MD.**

(State)

Bride's

Residence **4674 Heights Avenue**

Marital Status

**DIVORCED**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date

**NOV 18 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 5 1985**

License Fee \$

**55.00****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45546

## Certificate of Marriage

State of Maryland

LICENSE NO.

130906

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 5 day of DEC 9 19 85the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ERIC C GAY

Age 22

Birthplace

N J

(State)

Groom's  
Residence

122K SOUTHBRIDGE DR A.A.CO.MD.

Marital Status

SINGLE

Bride's  
Name

HYANGMI LEE

Age 22

Birthplace

KOREA

(State)

Bride's  
Residence

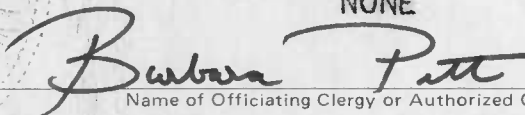
122K SOUTHBRIDGE DR A.A.CO.MD.

Marital Status

SINGLE

Relationship to groom if any

NONE



Name of Officiating Clergy or Authorized Officer

License Date

DEC 5 85

JW

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-5-85

License Fee \$

25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and for-  
warded to the Division of Vital Records, State Depart-  
ment of Health and Mental Hygiene, 201 W. Preston Street,  
Baltimore, MD 21201, upon receipt of page 3, copy of  
Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45547

LICENSE NO.

130893

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 5TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM C BACE**

Age **32** Birthplace **N.Y.**

(State)

Groom's Residence **6128 STUART AVE**

Marital Status **SINGLE**

Bride's Name **AZITA VAZAN**

Age **20** Birthplace **IRAN**

(State)

Bride's Residence **4 BRESLIN CT BALTO CO MD**

Marital Status **SINGLE**

Relationship to groom if any

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 5,**

85

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

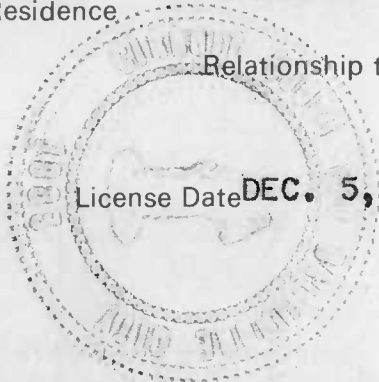
**DEC 5 1985**

**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

State of Maryland

85-45548

LICENSE NO.

130875

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>LONNIE EDWARD MONTAGUE, JR.</b>	Age	<b>23</b>	Birthplace	<b>MD.</b> (State)
Groom's Residence	<b>3718 PARK HEIGHTS AVENUE</b>	Marital Status	<b>SINGLE</b>		
Bride's Name	<b>ROCHELLE PATRICE HAMMOND</b>	Age	<b>25</b>	Birthplace	<b>MD.</b> (State)
Bride's Residence	<b>913 N. AUGUSTA AVENUE</b>	Marital Status	<b>SINGLE</b>		

Relationship to groom if any **NONE**

**JOHN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6 85**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

**SABINDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45549

## Certificate of Marriage

State of Maryland

LICENSE NO.

130837

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH day of DECEMBER 1985  
**BALTIMORE CITY**

the following persons were by me united in marriage at \_\_\_\_\_  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ARTHUR KYLIAVAS**

Age **25** Birthplace **MD.**  
 (State)

Groom's Residence **611 S SMALLWOOD ST**

Marital Status **SINGLE**

Bride's Name **JOYCE M SMITH**

Age **30** Birthplace **MD.**  
 (State)

Bride's Residence **611 S SMALLWOOD ST**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 29 85**

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

**DEC 6 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45550

LICENSE NO.

130642

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

BRIAN L. BRINKLEY

Age 28

Birthplace MARYLAND  
(State)

Groom's  
Residence

611 S. GLOVER STREET

Marital Status

SINGLE

Bride's  
Name

VALERIE C. MANAS

Age 24

Birthplace ALGERIA  
(State)

Bride's  
Residence

3603 SYLVAN DRIVE BALTO.CO.MD.

Marital Status

SINGLE

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

License Date NOV 20 85

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 6 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45551

LICENSE NO.

130883

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WELLINGTON L WILKINS

Age 47 Birthplace N CAR  
(State)

Groom's  
Residence

5 S CHESTER ST

Marital Status

**SINGLE**

Bride's  
Name

MERETA LOCKLEAR

Age 37 Birthplace N CAR  
(State)

Bride's  
Residence

5 S CHESTER ST

Marital Status

**SINGLE**

Relationship to groom if any

**NONE**

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6 85**

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 6 1985**  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

TT

2

85-45552

## Certificate of Marriage

State of Maryland

LICENSE NO.

130873

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6TH. day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

RAYMOND JONES

Age 48

Birthplace MD.  
(State)Groom's  
Residence

1703 CHASE STREET

Marital Status

DIVORCED

Bride's  
Name

VELVANE OAKLEY

Age 44

Birthplace MD.  
(State)Bride's  
Residence

1703 CHASE STREET

Marital Status

DIVORCED

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 6,

85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 6 1985

License Fee \$ 25.00SAUNDRA E. BANKS, CLERK  
Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45553

LICENSE NO.

130843

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

I Hereby Certify that on the 6TH day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **FAZUEL MOHAMMED**

Age **20** Birthplace **TRINIDAD**  
(State)

Groom's Residence **3826 FAIRHAVEN AVENUE**

Marital Status **SINGLE**

Bride's Name **SUSAN C., PATRAK**

Age **19** Birthplace **MARYLAND**  
(State)

Bride's Residence **3826 FAIRHAVEN AVENUE**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6**

85

**DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 6 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

*Certificate of Marriage*  
*State of Maryland*

85-45554

LICENSE NO.  
 130915

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)  
 in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MEDHAT S ABU-SHAABAN**

Age **29** Birthplace **EGYPT**  
(State)

Groom's Residence **6859 QUEENFERRY RD**

Marital Status **SINGLE**

Bride's Name **SUHA S. TABBA**

Age **22** Birthplace **KUWAIT**  
(State)

Bride's Residence **6859 QUEENFERRY RD**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6,**

**85**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 6 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45555

LICENSE NO.

130913

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOSEPH B WILKERSON**

Age **67** Birthplace **N CAR**  
(State)

Groom's Residence **2000 O'DELL AVE**

Marital Status **SINGLE**

Bride's Name **CATHERINE M QUANN**

Age **65** Birthplace **PA.**  
(State)

Bride's Residence **2000 O'DELL AVE**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6,**

85

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of the record filed in this

office on

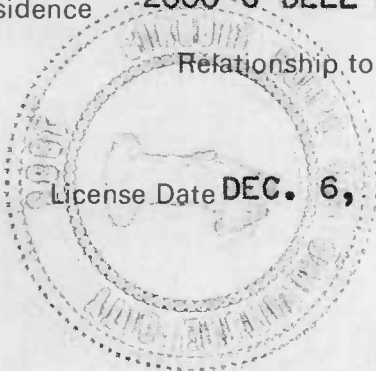
**DEC 6 1985**

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

85-45556

## State of Maryland

LICENSE NO.

130904

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 6TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

LEON M WILLIAMS

Age

32

Birthplace

VA

(State)

Groom's  
Residence

3203 GREENMEADE RD BALTO CO MD

Marital Status

SINGLE

Bride's  
Name

GWENDOLYN L SPEED

Age

30

Birthplace

MD.

(State)

Bride's  
Residence

1620 E FEDERAL ST

Marital Status

DIVORCED

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

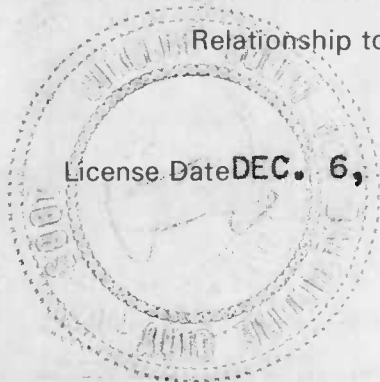
DEC 6 1985

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

85-45557

State of Maryland

LICENSE NO.

130899

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH day of DECEMBER 7 1985  
BALTIMORE, MD

the following persons were by me united in marriage at \_\_\_\_\_  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **LAWRENCE PHIFER**

Age **41** Birthplace **N.C.**  
 (State)

Groom's Residence **4018 WILSBY AV.**

Marital Status **SINGLE**

Bride's Name **PAULETTE PARKER**

Age **33** Birthplace **MD.**  
 (State)

Bride's Residence **1924 HOPE ST.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 6 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Date **DEC. 5** **85**

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

State of Maryland

85-45558

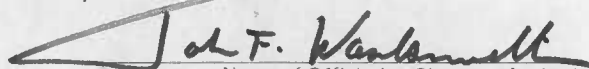
LICENSE NO.  
130920

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6TH day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **MARK WAYNE MATTHEWS**Age **19** Birthplace **MD.**  
(State)Groom's  
Residence **415 HAZLETT AVENUE**Marital Status **SINGLE**Bride's  
Name **KIMBERLY ANN WADE**Age **16** Birthplace **MD.**  
(State)Bride's  
Residence **322 MARTINGALE AVENUE**Marital Status **SINGLE**Relationship to groom if any **NONE**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6 85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 6 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45559

LICENSE NO.

130739

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6 day of DEC 9 19 85

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

3 17

Groom's  
Name **STEVE EDWARD SIDOR**

Age **26** Birthplace **MD.**  
(State)

Groom's  
Residence **7452 LAWRENCE RD. BALTO.CO.,MD**

Marital Status **SINGLE**

Bride's  
Name **LAURA ANN HINES**

Age **20** Birthplace **MD.**  
(State)

Bride's  
Residence **7452 LAWRENCE RD. BALTO.CO.,MD**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 6 85**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 6 1985**

License Fee \$ **25.00**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45560

LICENSE NO.

130529

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 6TH day of DECEMBER 1985

**BALTIMORE CITY**

the following persons were by me united in marriage at \_\_\_\_\_

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	MELVIN D. WALKER	Age	30	Birthplace	VA.
Groom's Residence	735 N. CENTRAL AVE.	Marital Status	SINGLE		
Bride's Name	OBUBELEYE P. BOBMANUEL	Age	24	Birthplace	NIGERIA
Bride's Residence	4925 GOODNOW RD.	Marital Status	SINGLE		
Relationship to groom if any	NONE				

JOAN C. ANDERSON

— Name of Officiating Clergy or Authorized Officer

License Date **DEC. 6**

**85 DEP. CLK.—CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 6 1985**

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45561

State of Maryland

LICENSE NO.  
131240

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31ST day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name AARON MAAge 22 Birthplace CHINA  
(State)Groom's  
Residence 2838 EDMONDSON AV.Marital Status SINGLEBride's  
Name TONI CHINAge 19 Birthplace MD.  
(State)Bride's  
Residence 2838 EDMONDSON AV.Marital Status SINGLERelationship to groom if any NONELicense Date DEC. 31 85Barbara Pitt  
Name of Officiating Clergy or Authorized Officer  
**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this  
office on 12-31-85**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

# Certificate of Marriage

85-45562

## State of Maryland

LICENSE NO.

130894

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 31<sup>ST</sup> day of Dec. 19 85

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

LARRY ELDON OWEN

Age 32 Birthplace MD.  
(State)Groom's  
Residence

3116 FOSTER AVENUE

Marital Status DIVORCEDBride's  
Name

GENA MARIE WITTE

Age 23 Birthplace MD.  
(State)Bride's  
Residence

3116 FOSTER AVENUE

Marital Status SINGLERelationship to groom if any NONELicense Date DEC. 9

85

John F. Wehrell  
Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-31-85  
**SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

2

85-45563

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130788

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 2nd day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **TONY E. BROWN**Age **28** Birthplace **MD.**  
(State)Groom's  
Residence **2801 CLIFTON AV.**Marital Status **SINGLE**Bride's  
Name **COLLEEN MIRANDA MASON**Age **21** Birthplace **VA.**  
(State)Bride's  
Residence **4900 CHALLEDON RD.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 2 1985****DEO. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

JW

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on **DEC 2 1985**License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

*Certificate of Marriage*  
*State of Maryland*

85-45564

LICENSE NO.  
 128086

Copy for State Department of Health and Mental Hygiene  
**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 3<sup>rd</sup> day of Dec. 1985

the following persons were by me united in marriage at Balto. Md.  
 (City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **RAYMOND CHARLES HIRSCH**

Age **25** Birthplace **MD.**  
 (State)

Groom's Residence **715 N. BELNORD AVENUE**

Marital Status **DIVORCED**

Bride's Name **LINDA KAY POLING**

Age **32** Birthplace **W. VA.**  
 (State)

Bride's Residence **10 SKIPJACK CT. BALTO. CO., MD.**

Marital Status **DIVORCED**

Relationship to groom if any **NONE**

License Date **OCT. 15,**

85

John F. Wankamill  
 Name of Officiating Clergy or Authorized Officer

Deputy Clerk Court  
 Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-3-85

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 25<sup>00</sup>

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

85-45565

State of Maryland

LICENSE NO.

130821

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 3rd day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

ERNEST LEE SYKES

Age 21

Birthplace MD.  
(State)Groom's  
Residence

5012 DENVEIW WAY

Marital Status SINGLE

Bride's  
Name

MONA RENEE VINSON

Age 25

Birthplace MD.  
(State)

Bride's

Residence

5012 DENVEIW WAY

Marital Status SINGLE

Relationship to groom if any

NONE

License Date DEC. 3 85

Name of Officiating Clergy or Authorized Officer  
John F. Wankamith  
DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00Signature Clerk of the Court  
SAUNDRA E. BANKS, CLERK

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45566

LICENSE NO.

130782

Copy for State Department of Health and Mental Hygiene

## BALTIMORE CITY (30)

I Hereby Certify that on the 2 day of DEC 9 19 85

the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	<b>PANAGIOTIS A. DIMAKAKOS</b>	Age	<b>33</b>	Birthplace	<b>GREECE</b> (State)
Groom's Residence	<b>5019 HARFORD RD.</b>	Marital Status	<b>DIVORCED</b>		
Bride's Name	<b>MARIA PASSAMICHALIS</b>	Age	<b>31</b>	Birthplace	<b>GREECE</b> (State)
Bride's Residence	<b>5019 HARFORD RD.</b>	Marital Status	<b>DIVORCED</b>		
Relationship to groom if any	<b>NONE</b>				

License Date **DEC 2 85**

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**12-2-85**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45567

## Certificate of Marriage

State of Maryland

LICENSE NO.

130758

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 2 day of DEC 9 19 85the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name HARRY W. PAYNE Age 39 Birthplace MD.  
(State)  
Groom's Residence 448 RIVERSIDE DR. A.A. CO., MD. Marital Status DIVORCED

Bride's Name VANESSA A. ANDERSON. Age 21 Birthplace N.Y.  
(State)  
Bride's Residence 448 RIVERSIDE DR. A.A. CO., MD. Marital Status SINGLE

Relationship to groom if any NONE

License Date

DEC 2 85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

SAUNDRA E. BANKS, CLERK  
12-2-85License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45568

LICENSE NO.  
130776

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 2nd day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name **PHILLIP NATHANIEL MCCOY**

Age 31 Birthplace MD.  
(State)

Groom's

Residence **4952 DENMORE. AV.**

Marital Status **SINGLE**

Bride's

Name **PATRICIA ANN SIMMONS**

Age 29 Birthplace MD.  
(State)

Bride's

Residence **4952 DENMORE AV.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 2**

**85**

**DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45569

State of Maryland

LICENSE NO.

130859

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 2nd day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name CHRISTOPHER L. BLADO Age 26 Birthplace NEW JERSEY  
(State)Groom's Residence 4705-D GATEWAY TERRACE BALTO.CO.,MD Marital Status SINGLEBride's Name LISA MARIE PHILLIPS Age 21 Birthplace NEW JERSEY  
(State)Bride's Residence 4705-D GATEWAY TERRACE BALTO.CO.,MD Marital Status SINGLERelationship to groom if any NONE

Name of Officiating Clergy or Authorized Officer

License Date DEC. 285 DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

tt

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on DEC 2 1985License Fee \$ 55.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45570

## Certificate of Marriage

State of Maryland

LICENSE NO.

130628

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 2ND day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES EDWARD MC DONALDSON**Age **40** Birthplace **MD.**  
(State)Groom's Residence **909 W. 37th STREET**Marital Status **DIVORCED**Bride's Name **DONNA LEE LIGHTNER**Age **32** Birthplace **MD.**  
(State)Bride's Residence **909 W. 37th STREET**Marital Status **DIVORCED**Relationship to groom if any **NONE****THERESA A. TUTMAN**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 20****85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 2 1985**

License Fee \$

**25.00****SAUNDRA E. BARKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45571

State of Maryland

LICENSE NO.

130493

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 2nd day of Dec. 19 85

the following persons were by me united in marriage at

Balto. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **RONALD ERNEST LAY**Age **52** Birthplace **MD.**  
(State)Groom's  
Residence **3519 LYNDALE AVENUE**Marital Status **SINGLE**Bride's  
Name **EDITH ROSETTA LOVE**Age **48** Birthplace **MD.**  
(State)Bride's  
Residence **3519 LYNDALE AVENUE**Marital Status **DIVORCED**Relationship to groom if any **NONE**John F. Wankmiller

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 13****85**Deputy Clerk Curran  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-2-85License Fee \$ 25.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

## Certificate of Marriage

85-45572

State of Maryland

LICENSE NO.  
127241

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 2nd day of Dec. 19 85

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name ALAN M. BOISVERTAge 29 Birthplace RHODE ISLAND  
(State)

Groom's

Residence 4763 SHAMROCK AVENUEMarital Status SINGLE

Bride's

Name DEBORAH M. CAPLANAge 28 Birthplace PENNSYLVANIA  
(State)

Bride's

Residence 4763 SHAMROCK AVENUEMarital Status DIVORCEDRelationship to groom if any NONELicense Date JUNE 17,

85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-2-85SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45573

## Certificate of Marriage

State of Maryland

LICENSE NO.

130862

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 2 day of DEC 9 1985

BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

GLENN GRIFFIN, JR.

Age 49 Birthplace WASH., D.C.  
(State)Groom's  
Residence

704 MC KEWIN AVENUE

Marital Status SINGLEBride's  
Name

BETTY M. BOLYARD

Age 52 Birthplace W. VIRGINIA  
(State)Bride's  
Residence

704 MC KEWIN AVENUE

Marital Status SINGLE

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 2 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date

DEC 2 85

JW

License Fee \$

25.50

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45574

## Certificate of Marriage

State of Maryland

LICENSE NO.

131151

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 31 day of Dec 9 85

the following persons were by me united in marriage at

Balti Md  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's

Name TIMOTHY PAUL FALESAge 19

Birthplace

MD.

(State)

Groom's

Residence 4335 BELAIR ROADMarital Status SINGLE

Bride's

Name CHRISTINE LYNN BARNHEARTAge 18

Birthplace

MD.

(State)

Bride's

Residence 4335 BELAIR ROADMarital Status SINGLE

Relationship to groom if any

NONELicense Date DEC, 20

85

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00SAMUEL E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45575

## Certificate of Marriage

State of Maryland

LICENSE NO.

130838

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9th day of Dec. 19 85

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

GARY PRINTICE MELVIN, JR

Age 18

Birthplace

MD.

(State)

Groom's  
Residence

34 BROOKBURY DR. BALTO.CO., MD

Marital Status SINGLE

Bride's

Name

VALERIE LYNN HUFF

Age 19

Birthplace

MD.

(State)

Bride's

Residence

3716 MARMON AV.

Marital Status SINGLE

Relationship to groom if any NONE

License Date DEC. 2

85

John F. Wandermill  
Name of Officiating Clergy or Authorized OfficerDeputy Clerk Christine Counts  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12.9.85

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45576

## Certificate of Marriage

State of Maryland

LICENSE NO.

130934

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9TH. day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ROGER GRANT MYERS**Age **37** Birthplace **PA.****SINGLE**Groom's  
Residence **1302 KUPER STREET**Marital Status **ANNULLED**Bride's  
Name **WANDA LEE MC GRAW**Age **27** Birthplace **MD.**

(State)

Bride's  
Residence **508 S. PULASKI STREET**Marital Status **DIVORCED**Relationship to groom if any **NONE****JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 9 85** **DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 9 1985**  
**SAUNDRA E. BANKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

State of Maryland

85-45577

LICENSE NO.

130759

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9TH. day of DECEMBER 9 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **ANTHONY OLLEN ROYSTER**

Age **24** Birthplace **MD.**  
(State)

Groom's Residence **2711 GWYNNFALLS PKWY.**

Marital Status **SINGLE**

Bride's Name **ROBBIN DENISE WILLIAMS**

Age **23** Birthplace **MD.**  
(State)

Bride's Residence **1208 YOUNG COURT.**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **NOV. 27** **85**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 9 1985**

License Fee \$ **25.00**

**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45578

State of Maryland

LICENSE NO.  
130960

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9TH day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name **ROBERT GARY JACKSON, JR.**Age **16** Birthplace **MD.**  
(State)Groom's  
Residence **6893 MC CLEAN BLVD.**Marital Status **SINGLE**Bride's  
Name **TERESSA LINNELL DORSEY**Age **16** Birthplace **MD.**  
(State)Bride's  
Residence **6893 MC CLEAN BLVD.**Marital Status **SINGLE**Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 9 85****DEP. CLK.-CIRCUIT COURT OF BALTO. CITY**

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 9 1985**  
**SAUNDRA E. BARKS, CLERK**License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45579

## State of Maryland

LICENSE NO.

130932

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 9TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name ANTHONY JOHN TAYLOR

Age 39 Birthplace MD.  
(State)

Groom's Residence 29 S. ROSEDALE STREET

Marital Status SINGLE

Bride's Name SHARON BERNICE THOMAS

Age 31 Birthplace MD.  
(State)

Bride's Residence 29 S. ROSEDALE STREET

Marital Status SINGLE

Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 9,

85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

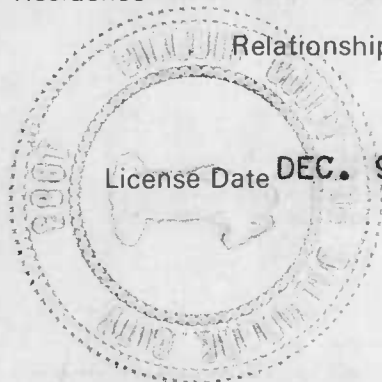
office on DEC 9 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.





2

# Certificate of Marriage

State of Maryland

85-45580

LICENSE NO.

130905

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 9TH. day of DECEMBER <sup>9</sup> 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **WILLIAM WORSLEY**

Age **55** Birthplace **MD.**  
(State)

Groom's Residence **29 N ABINGTON AVE**

Marital Status **DIVORCED**

Bride's Name **GWENDOLYN RANDELL**

Age **34** Birthplace **MD.**  
(State)

Bride's Residence **1643 VINCENT CT**

Marital Status **SINGLE**

Relationship to groom if any

**NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 9,** **85**

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

**DEC 9 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45581

State of Maryland

LICENSE NO.

129399

Copy for State Department of Health and Mental Hygiene

BALTIMORE CITY (30)

I Hereby Certify that on the 9TH day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name PHILLIP A ROUTHIER

Age 60 Birthplace MICH (State)

Groom's Residence 319 W LORRAINE AVE

Marital Status DIVORCED

Bride's Name MARIE F WIEGAND

Age 72 Birthplace PA. (State)

Bride's Residence 1600 W MT ROYAL AVE

Marital Status NONE

Relationship to groom if any

JOAN C. ANDERSON

Name of Officiating Clergyman or Authorized Officer

License Date SEPT. 13 85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergyman or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, Md. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

DEC 9 1985

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

2

85-45582

## Certificate of Marriage

State of Maryland

LICENSE NO.

130924

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 9TH day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name	WALTER JENKINS JR	Age	20	Birthplace	MD.
				(State)	
Groom's Residence	10 WOODSTREAM CT BALTO CO MD	Marital Status	SINGLE		
Bride's Name	ANNETTE P CARTER	Age	25	Birthplace	MD.
				(State)	
Bride's Residence	10 WOODSTREAM CT BALTO CO MD	Marital Status	SINGLE		
Relationship to groom if any	NONE				

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date DEC. 9

85 DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 9 1985

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

## Certificate of Marriage

85-45583

State of Maryland

LICENSE NO.

130610

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6TH day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WILLIAM F BANKS JR

Age 24Birthplace MD.  
(State)Groom's  
Residence

3705 FOREST PK AVE

Marital Status

SINGLE

Bride's  
Name

LINDA G TODD

Age 21Birthplace MD.  
(State)Bride's  
Residence

4404 KATHLAND AVE

Marital Status

SINGLE

Relationship to groom if any

NONE

BARBARA JEAN PITT

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 6 1985

License Fee \$

55.00

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45584

## Certificate of Marriage

State of Maryland

LICENSE NO.

130228

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6TH day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name JOSEPH A. JAWORSKIAge 40 Birthplace MD.  
(State)Groom's Residence 333 GUSRYAN STREETMarital Status DIVORCEDBride's Name NANCY L. DUVALLAge 42 Birthplace PA.  
(State)Bride's Residence 520 WEST DRIVE A.A. CO.CO., MD.Marital Status DIVORCEDRelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 6 85DEP. CLK.-CIRCUIT OF BALTO. CITY

Title and Religious Denomination or Office

TT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00SAURD.A E. BANKS, CLERK

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45585

## Certificate of Marriage

State of Maryland

LICENSE NO.

129753

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 6TH. day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **DARRYL L BUTLER**Age **23** Birthplace **MD.**Groom's Residence **1840 W BALTIMORE ST**

Marital Status

(State)  
**SINGLE**Bride's Name **JULIET I KING**Age **22** Birthplace **WEST INDIES**Bride's Residence **1840 W BALTIMORE ST**

Marital Status

(State)  
**SINGLE**

Relationship to groom if any

**NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **OCT. 1 85****DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 55.00**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45586

## Certificate of Marriage

State of Maryland

LICENSE NO.

130911

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 12TH day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

2:02

Groom's  
Name

LARRY MICHAEL CRAMBLITT

Age 23

Birthplace

MD.

(State)

Groom's

Residence 613 S. SMALLWOOD STREET.

Marital Status SINGLE

Bride's

Name BARBARA ANN COOKE

Age 23

Birthplace

MD.

(State)

Bride's

Residence 613 S. SMALLWOOD STREET.

Marital Status SINGLE

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 12

85

DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD. 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45587

# Certificate of Marriage

State of Maryland

LICENSE NO.  
130892

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 12TH. day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

**MICHAEL S WILCOX**

Age 29 Birthplace MD.  
(State)

Groom's  
Residence

**230 N ROSE STREET**

Marital Status **DIVORCED**

Bride's  
Name

**JOANNA M FLEIG**

Age 41 Birthplace MD.  
(State)

Bride's  
Residence

**230 N ROSE STREET**

Marital Status **DIVORCED**

Relationship to groom, if any

**NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 5 85** **DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

**DEC 12 1985**

**SAUNDRA L. BANKS, CLERK**

License Fee \$ 25.00

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45588

State of Maryland

LICENSE NO.  
130852

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 12 day of DEC 9 19 85

**BALTO MD**

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KENNETH M. NELSON**

Age **30** Birthplace **MD.**  
(State)

Groom's Residence **136 N. JANNEY STREET**

Marital Status **DIVORCED**

Bride's Name **MARGARET A. COLLINS**

Age **18** Birthplace **MD.**  
(State)

Bride's Residence **133 N. JANNEY STREET**

Marital Status **SINGLE**

Relationship to groom if any **NONE**

**JOHN F. WANKMILLER**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 12 85**

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on \_\_\_\_\_

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**  
Signature — Clerk of the Court

**DEC 12 1985**

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45589

## Certificate of Marriage

State of Maryland

LICENSE NO.

130951

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 12TH. day of DECEMBER 1985the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name STEPHEN D. KOEHLER Age 27 Birthplace MD.  
 Groom's Residence 301 S. CONKLING ST. Marital Status DIVORCED  
 Bride's Name SANDRA D. BALL Age 18 Birthplace MD.  
 Bride's Residence 301 S. CONKLING ST. Marital Status SINGLE  
 Relationship to groom if any NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 12 1985SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Date DEC. 12, 85License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45590

## Certificate of Marriage

State of Maryland

LICENSE NO.

130607

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 12TH. day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **JOSEPH M. KLINE, JR.** Age **40** Birthplace **MD.**  
 Groom's Residence **1507 WILLIAM ST.** Marital Status **DIVORCED**  
 Bride's Name **MARY T. VIRGIL** Age **35** Birthplace **MD.**  
 Bride's Residence **1507 WILLIAM ST.** Marital Status **DIVORCED**

Relationship to groom if any **NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of record filed in this

office on

**DEC 12 1985****SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

License Fee \$ 8.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45591

## Certificate of Marriage

State of Maryland

LICENSE NO.

130816

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 12<sup>th</sup> day of Dec. 9 1985

the following persons were by me united in marriage at

Balti. Md.  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **KIRBY GREGORY**Age **25** Birthplace **MD.**  
(State)Groom's Residence **519 DENNISON ST**Marital Status **SINGLE**Bride's Name **NOVELLA S FORD**Age **19** Birthplace **MD.**  
(State)Bride's Residence **2439 LAKEVIEW AVE**Marital Status **SINGLE**

Relationship to groom if any

**NONE**

License Date

**DEC 6****85**

Name of Officiating Clergy or Authorized Officer

Deputy Clerk Circuit Court  
Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12-12-95

License Fee \$

25.00**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45592

State of Maryland

LICENSE NO.

130935

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Heroby Certify* that on the 12TH day of DECEMBER 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **MARK PATRICK LYLES**

Age **22** Birthplace **MD.**

(State)

Groom's Residence **1112 BARCLAY ST.**

Marital Status **SINGLE**

Bride's Name **CAROLYN JANE NELSON**

Age **23** Birthplace **MD.**

(State)

Bride's Residence **1112 BARCLAY ST.**

Marital Status **SINGLE**

Relationship to groom if any

**NONE**

*John F. Wankmull*

Name of Officiating Clergy or Authorized Officer

License Date **DEC. 12**

**85****DEPUTY CLERK-CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that this is a true copy of a record filed in this

office on

**DEC 12 1985****SAUNDRA E. BANKS, CLERK**

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45593

## Certificate of Marriage

State of Maryland

LICENSE NO.  
130944

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

I Hereby Certify that on the 11 day of DEC 9 1985  
BALTO MD

the following persons were by me united in marriage at \_\_\_\_\_  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name REGINALD ELIJAH SANDERS, JR

Age 25 Birthplace S.C.  
(State)

Groom's  
Residence 4217 FERNHILL AV.

Marital Status SINGLE

Bride's  
Name LISA DENISE WILLIAMS

Age 22 Birthplace MD.  
(State)

Bride's  
Residence 716 E. 33RD ST.

Marital Status SINGLE

Relationship to groom if any

NONE

License Date

DEC 11 85

JW

Name of Officiating Clergy or Authorized Officer

Title and Religious Denomination or Office

DEPUTY CLERK CIRCUIT COURT

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

12.11.85

License Fee \$ 25.00

SAUNDRA E. BANKS, CLERK

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45594

## Certificate of Marriage

State of Maryland

LICENSE NO.

130985

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11th day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name GARY RICHARD HOODAge 36 Birthplace MD.  
(State)Groom's  
Residence 1214 N. CHARLES STREETMarital Status SINGLEBride's  
Name MARSHA HEATHER HAINESAge 27 Birthplace MD.  
(State)Bride's  
Residence 8409 ALLENWOOD RD. BALTO. CO., MD. Marital Status DIVORCEDRelationship to groom if any NONEJOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 11 85DEPUTY CLERK-CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 11 1985  
SARAH E. BARKS, CLERKLicense Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201 upon receipt of page 3, copy of Certificate for Clerk of Court.

2

## Certificate of Marriage

85-45595

State of Maryland

LICENSE NO.

130943

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11 day of DEC 9 1985the following persons were by me united in marriage at BALTO MD  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's Name **CHARLES C. STEWART , 2nd** Age **32** Birthplace **LOUISIANA**  
(State)

Groom's Residence **304 GWYNN AVENUE** Marital Status **DIVORCED**

Bride's Name **MARGARET ANN MCGIFFIN** Age **37** Birthplace **WASH., D.C.**  
(State)

Bride's Residence **3801 SCHNAPER DR. BALTO. CO., MD.** Marital Status **DIVORCED**

Relationship to groom if any **NONE**

**JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

License Date **DEC 11 85**

JW

Title and Religious Denomination or Office

**DEPUTY CLERK CIRCUIT COURT**

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true and correct record filed in this

office on

**DEC 11 1985****SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

# Certificate of Marriage

85-45596

## State of Maryland

LICENSE NO.

130957

Copy for State Department of Health and Mental Hygiene

### BALTIMORE CITY (30)

*I Hereby Certify* that on the 11TH. day of DECEMBER 9 19 85

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

WILLIAM CARTER JR

Age 32

Birthplace MD.

Groom's  
Residence

1022 N CENTRAL AVE

Marital Status

(State)  
DIVORCEDBride's  
Name

DIANNE P LEWTON

Age 37

Birthplace GA

Bride's  
Residence

4 DUTROW CT BALTO CO MD

Marital Status

(State)  
WIDOW

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 10 85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 11 1985

License Fee \$ 25.00

**SAUNDRA E. BANKS, CLERK**

Signature - Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

# Certificate of Marriage

85-45597

## State of Maryland

LICENSE NO.

130973

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**

*I Hereby Certify* that on the 11TH. day of DECEMBER 1985

the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

RUSSELL D BURMEISTER

Age 31

Birthplace MD.  
(State)Groom's  
Residence

1113 HAVERHILL RD

Marital Status SINGLE

Bride's  
Name

DIANNE R PAILER

Age 28 Birthplace MD.  
(State)Bride's  
Residence

3542 BENZINGER RD

Marital Status DIVORCED

Relationship to groom if any

NONE

JOAN C. ANDERSON

Name of Officiating Clergy or Authorized Officer

License Date DEC. 11,

85

DEPUTY CLERK - CIRCUIT COURT

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office of

SAUNDRA E. BANKS, CLERK

Signature - Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.

2

85-45598

## Certificate of Marriage

State of Maryland

LICENSE NO.

130255

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 11TH. day of DECEMBER 19 85the following persons were by me united in marriage at BALTIMORE, MD.

(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name**VICTOR E. LINDEN**

Age

22

Birthplace

(State) **MD.**Groom's  
Residence**4606 ARABIA AVE.**

Marital Status

**SINGLE**Bride's  
Name**CATHERINE J. FIORINO**

Age

26

Birthplace

(State) **MD.**

Bride's

Residence

**3810 PERRY HURST PL. BALTO.CO., MD.**

Marital Status

**SINGLE**

Relationship to groom if any

**NONE****JOAN C. ANDERSON**

Name of Officiating Clergy or Authorized Officer

**DEPUTY CLERK - CIRCUIT COURT**

Title and Religious Denomination or Office

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

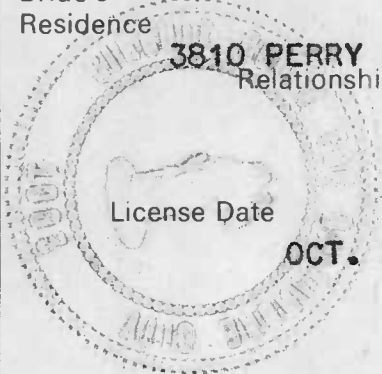
office on

**DEC 11 1985**  
**SAUNDRA E. BANKS, CLERK**

Signature — Clerk of the Court

License Fee \$ 25.00

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.



2

85-45599

## Certificate of Marriage

State of Maryland

LICENSE NO.

130976

Copy for State Department of Health and Mental Hygiene

**BALTIMORE CITY (30)**I Hereby Certify that on the 13TH day of DECEMBER 9 19 85the following persons were by me united in marriage at BALTIMORE CITY  
(City or Town)

in accordance with the License of the Clerk of the Court in the jurisdiction shown above.

Groom's  
Name

CLINTON E. MILLER

Age 28

Birthplace

MICH

(State)

Groom's  
Residence

1311 ALLENBY CT. HARFORD CO MD

Marital Status

SINGLE

Bride's  
Name

NANCY L. PENCEK

Age 30

Birthplace

MD.

(State)

Bride's  
Residence

3124 E BALTO ST

Marital Status

DIVORCED

Relationship to groom if any

NONE

JOHN F. WANKMILLER

Name of Officiating Clergy or Authorized Officer

License Date DEC 12 85

DEP. CLK.-CIRCUIT COURT OF BALTO. CITY

Title and Religious Denomination or Office

jw

Address of Clergy or Authorized Officer

CERTIFICATION OF CLERK OF THE COURT

I hereby certify that the above is a true copy of a record filed in this

office on

DEC 13 1985

SAUNDRA E. BANKS, CLERK

License Fee \$ 25.00

Signature — Clerk of the Court

This copy to be held by the Clerk of the Court, and forwarded to the Division of Vital Records, State Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, upon receipt of page 3, copy of Certificate for Clerk of Court.